

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.

SF-079160

IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.

1. WELL ☐ 2. AS WELL ☒ 3. OTHER

4. NAME OF OPERATOR

Union Oil Company of California

5. ADDRESS OF OPERATOR

P. O. Box 671 - Midland, TX 79702

6. LOCATION OF WELL (Report location clearly and in accordance with appropriate requirements.
See also space 17 below.)
at surface

1658' ENL & 2311' FEL

7. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6459' GR

8. UNIT AGREEMENT NAME

Rincon Unit

9. FARM OR LEASE NAME

Rincon Unit

10. WELL NO.

270

11. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

12. SEC. T. R. M. OR S.E. AND SURVEY OR AREA

Sec. 12, T-26-N, R-7-W

13. COUNTY OR PARISH

Rio Arriba

14. STATE

NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

REPAIR OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACURE TREAT

MULTIPLE COMPLETE

FRACURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON

SHOOTING OR ACIDIZING

ABANDONMENT

REPAIR WELL

CHANGE PLANS

(Other) Completion work

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

5/3 RIH W/3-7/8" BIT ON 2-3/8" TBG TO TCC @ 2267'. TSTD BOP & 4-1/2" CSG TO 1500 PSI, OK. DRLD DV TOOL @ 2356'. TSTD DV TOOL TO 1500 PSI, OK. RIH TO 2641'. DRLD CMT, FC & CMT TO 2778' ETD. CIRC HOLE CLEAN, TSTD 4-1/2" CSG TO 1500 PSI, OK. SDON.

5/4 SWBD F-LVL TO 1700'. POH, LD 2-3/8" TBG. RAN GR-CCL PDC FRM 2777' WL-ETD TO 2000'. PERF FRUITLAND COAL ZONE W/3-1/8" DP CSG GUN W/4 SPF @ 2627-2738' (88 TOTAL HOLES). F-LVL 1600' & STDY. WD BOP & NU TREE. RD & MO DD PU. (PREP TO FRAC). SDON.

5/6 SDCP 270#. RAN BHP & GR TEMP SURVEY 2000-2777'. (PREP TO FRAC). SION.

5/16 DOWELL SWF FRUITLAND COAL 2627-2738' W/50,000 GAL 30# BKL GEL, 191,500# 20/40 SD TAGGED W/45 MC IRIIDIUM 192, SD RAMPED 2-8 PPG. TREAT @ 40 BPM 1940-1620-1840-1680#. DURING 8# STAGE, GOING TO 10#, COMPUTER SHUT SD DOOR ON BLENDER. TERMINATE TAG & FLUSHED 8# SD W/30 BBL XL GEL. ISIP 934 (5) 851 (10) 818 (15) 782 (30) 703#. TL 1199 BBL. BLUE JET HL ATTEMPT TO RUN GR TEMP - COULD'NT PENETRATE XL GEL PAST 250'. RD WL. SI @ 5:00 PM MST 5-16-90.

5/18 MI RU PETRO WS. CSG ON VAC. (PREP TO CLEAN UP).

RIH W/2-3/8" TBG, TAGGED SD @ 2564'. REV OUT SD W/FW TO PBTD 2777'. GEL NOT BROKEN IN CSG. POOH TO 2525'. SWBD 58 BBLs GELLED H2O IN 10 RUNS. F-LVL HOLDING @ 1000'. GEL ENTERING WELL BORE BROKE. SLIGHTLY GAS CUT.

5/19 RIH & TAGGED FILL @ 2756'. CIRC CLEAN W/FW @ PBTD 2777'. RU BLUE JET & RAN GR-RA TRACER LOG FROM 2777' TO 2400'. LANDED 84 JTS (2644.38') 2-3/8" 4.7# J-55 EUE BRD TBG @ 2658' (31' INTO PERFS). NO BOP, NU TREE.

SWBD 122 BLW IN 23 RUNS. TR 122 BBLs OF 1199 BTL. CP 110 PSI F/HIGHLY GAS CUT. SDON.

5/25 BLEED CP 150# 0 PSI. TBG HAD SMALL BLOW. NO TREE. NU BOP. PU 2-3/8" TBG & RIH TAGGED TCC @ 2744'. CO 33' SD TO ETD @ 3277'. PU TO 2627'. SWBD 48 BW IN 3-1/2 HRS. F-LVL 1000' TO SN @ 2625'. RIH W/TBG TO ETD @ 3277'. NO FILL. (LOST 95 BW W/CLEANING SD). LANDED 84 JTS (2644.38') 2-3/8" 4.7# J-55 EUD BRD TBG @ 2658'. MADE 2 SWB RUNS KICKED WELL OFF. FLWD 30 BW IN 12 HRS ON 64/64" CK, FTP TSTM, CP 115#.

17. I hereby certify that the foregoing is true and correct

SIGNED

Charlotte Beeson

TITLE

Drilling Clerk

DATE

5/30/90

This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE

JUN 25 1990

*See Instructions on Reverse Side
NMOCD

FARMINGTON RESOURCE AREA
BY 201

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME Rincon Unit	
2. NAME OF OPERATOR Union Oil Company of California		8. FARM OR LEASE NAME Rincon Unit	
3. ADDRESS OF OPERATOR 3300 N. Butler Suite 200 Farmington, NM 87401		9. WELL NO. # 270	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1658' FNL & 2311' FEL		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 12, T26N, R7W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6,464' GL		12. COUNTY OR PARISH Rio Arriba	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Request additional 30 day test	(Other) <input checked="" type="checkbox"/> Request additional 30 day test
(Other) <input type="checkbox"/>		(Other) <input type="checkbox"/> (Note: Report results of multiple completion or Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

The well was perforated 5/4/90. However, testing the well could not begin until 5/24/90 due to the time necessary following perforating to fracture treat, flow back frac load, run and land downhole production tubing, and set surface production equipment. An additional 30 day test period is requested so the well can be adequately tested and prepared for first delivery. Current flared volume is approximately 100 MCFPD.

RECEIVED
JUN 29 1990
OIL CON. DIV.
DIST. 3

7/24/90

18. I hereby certify that the foregoing is true and correct

SIGNED _____ TITLE Field Superintendent DATE 5/25/90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE JUN 15 1990

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
Ken Townsend
FOR AREA MANAGER

*See Instructions on Reverse Side

NM000