

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 021121
2. NAME OF OPERATOR Union Oil Company of California		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 1611 - Casper, Wyoming 82601		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1450' FNL and 1190' FEL (SE NE)		8. FARM OR LEASE NAME Moncrief Federal
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5652' KB		10. FIELD AND POOL, OR WILDCAT Basin Dakota
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22, T29N, R12W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input checked="" type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(NOTE: Report results of multiple completion on 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.)*

6-15-69 Strong blow gas developed from surface casing. Killed well with fresh water down tubing and casing annulus and 75 bbl. 9 PPG brine. Pulled tubing, ran 4-1/2" casing scraper on tubing, casing clean. Set Baker Model "P" packer at 6088' on 2-3/8" OD tubing. Loaded tubing and casing with water, pressured to 700 psi. Small amount water circulated outside 4-1/2" OD casing. Gas began bubbling around outside 8-5/8" OD surface casing. Pumped cement down surface casing and circulated outside, very gas cut, cleared cement with water. Landed tubing with perfs below packer and shut in. Opened surface casing annulus, blew to pit. Picked up tubing 52", blew tubing. Pumped down tubing with 10 bbl. condensate, 125 bbls. Kenpak, 10 bbls. crude, 100 bbls. Kenpak. Shut in annulus and pumped in 25 bbls. Kenpak, displaced with 27 bbls. cond. Circulate through Bradenhead while pumping last Kenpak. Made two runs with swab, blew swab out of hole. Pumped 75 BW down tubing to kill well. Pumped 80 BW down casing, circulated out Bradenhead, recovered some gas and mud. Pumped 60 bbls. Kenpak down casing at max. press. 1500 psi. Pressured tubing and casing annulus to 1500 psi. Annulus full of Kenpak. Outside 4-1/2" casing dead. Swabbed well in. Well back on production July 2, 1969.

SEP 29 1969

OIL CON. COM.

DIST. 3

RECEIVED

SEP 29 1969

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

SIGNED

A. T. Mannon, Jr.

TITLE

District Drilling Supt.

DATE

9-18-69

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side