

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

**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 Form 9-331-C for such proposals.)

1. oil ☐ well      gas ☒ well      other

2. NAME OF OPERATOR  
UNION TEXAS PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR  
P.O. Box 808, Farmington, N.M. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1580' FSL & 1010' FWL (NW SW)  
AT TOP PROD. INTERVAL: same as above  
AT TOTAL DEPTH: same as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐

SUBSEQUENT REPORT OF:

(other) Complete re-seed and paint.

5. LEASE

SF 078244

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Taliaferro

9. WELL NO.

#7

10. FIELD OR WILDCAT NAME  
Blanco-Mesaverde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 29, T31N, R12W, NMPM

12. COUNTY OR PARISH      13. STATE  
San Juan      N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5957' Gr.

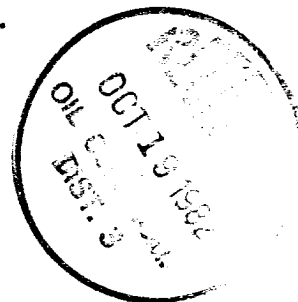
(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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

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.)\*

Location re-seeded with BLM seed mix #2 and above ground equipment

painted with Federal Standard Brown, 595a-30318.



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED \_\_\_\_\_ TITLE Field Oper. Manager DATE 9/24/82

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

OCT 17 1982

FARMINGTON DISTRICT  
BY *[Signature]*

\*See Instructions on Reverse Side

NMOCG