

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135  
Expires July 31, 1996

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill an abandoned well. Use Form 3160-3 (APD) for such proposals.

N.M. Oil Cons. Division  
811 S. 1st Street  
Artesia, NM 88210-2834

5. Lease Serial No.  
24811

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
North Benson Queen Unit

8. Well Name and No.  
North Benson Queen #25

9. API Well No.  
30-015-10127

10. Field and Pool, or Exploratory Area  
Benson Queen Grayburg, No

11. County or Parish, State  
Eddy, New Mexico

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Injection well

2. Name of Operator  
United Oil & Minerals, Inc.

3a. Address  
1001 Westbank Dr.  
Austin, TX 78746

3b. Phone No. (include area code)  
(512) 902-8184

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
660 FSL 2310 FWL Sec 28, T-18S, R-30E

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Acidize
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-Off
	<input checked="" type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other <u>Repair well head</u>

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Fished tubing & Packer.

Replaced wellhead

Bailed out to 3316'.

Acidized Perfs 2742-3296' w/1500gals. 15% NEFE.

Ran Arrow ASI X Packer & tubing, set packer @ 2671'.

After Circulating packer fluid, ran mechanical Integrity test.

ENTERED IN  
AFMSS

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed) G.J. Brockman

Title Manager

Signature

Date 8-25-99

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

RBDMS/BK

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