

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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

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

5. Lease Serial No.  
24811

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
N. Benson (Queen) Unit #14

9. API Well No.  
30-015-10131

10. Field and Pool, or Exploratory Area  
N. Benson Queen

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 Water Injection Well

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

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

3b. Phone No. (include area code)  
(915) 683-9838

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1980' FSL & 660' FWL, Section 28, T18S, R30E

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 type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input checked="" type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recomplete 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 recompletion 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.)

1. Repair wellhead
2. Acidized Perfs w/1875 gals. 15% NE-FE.
3. Replaced tubing string.
4. Set Arrowset ASLX Packer after circulating packer fluid. Packer set @ 2583'.
5. Ran MIT test. State observed test.

*Gary Williams*

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

Name (Printed/Typed)  
Gerald Brockman

Title  
Manager

Signature

Date 8-27-99

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.