

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Form approved:  
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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		30-039-25220	
2. NAME OF OPERATOR Union Oil Company of California dba UNOCAL			
3. ADDRESS OF OPERATOR P.O. Box 850, Bloomfield, New Mexico 87413			
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Rincon Unit 126 M - 810' FSL + 1175' FEL			
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6679' GR	
5. LEASE DESIGNATION AND SERIAL NO. SF-079367 A		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A	
7. UNIT AGREEMENT NAME Rincon Unit		8. FARM OR LEASE NAME Rincon Unit	
9. WELL NO. 126 M		10. FIELD AND POOL, OR WILDCAT Blanco MV, Basin DK	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 27, T27N, R6W		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 type="checkbox"/>	(Other) <input type="checkbox"/>

(Other) Install Cathodic Protection

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.)\*

Proposed installation of Cathodic Protection to well casing:

PROCEDURE: Drill a 6' diameter hole, 300' deep within the existing well location boundary. Ten Dur-Iron anodes will be installed below the uppermost water bearing formation in favorable locations. This will be backfield with coke breeze (99.5% carbon) to completely surround the anodes. A 50' plug of bentonite will be installed on top of the coke breeze.

A DC rectifier will be installed on existing well location and a buried DC positive cable will be connected to the anode from the rectifier. Negative DC cables from the rectifier will also be buried and connected to well casings to be protected. These cables will be buried 18" to 24" deep (on previously disturbed ground) in existing roads and locations. See attached map.

UNOCAL's completion expectation is July 1, 1993.

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

SIGNED Donald E. Luthien TITLE (Temp.) Production Tech DATE 9/21/92

(This space for Federal or State office use)

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

\*See Instructions on Reverse Side

NMOCD

R E W

$$\frac{1271}{1261}$$