Form 3160-5 (November 1983) (Formerly 9-331)	UNITED ST DEPARTMENT OF T	ATES HE INTERIOR	SUBMIT IN TRIPLICA (Other instructions on verse side)	Form approved. Budget Bureau No. 1004-013 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO.
	BUREAU OF LAND N	MANAGEMENT	RECEIVED	NM-45209
SUND (Do not use this fo	ORY NOTICES AND THE COP PROPORTIES TO DETERM OF APPLICATION FOR PERM OF APPLICATION FOR PERM	REPORTS ON deepen or plug back a	WELLS ROOM	6. IF INDIAN, ALLOTTEE OR TRISE NAME
				N/A 7. UNIT AGREEMENT NAME
OIL WELL GAS	07222	FARMING	TON RESOURCE ARE NGTON. NEW MEXICO	A N/A
NAME OF OPERATOR		i Minin	GIUN. NEW MEXICO	8. FARM OR LEASE NAME
Union Texas Petroleum				F-18-24-9
	v 64 Farmington	NTM 07401		2. Watti #0.
375 US Highway 64, Farmington, NM 87401 LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface				10. FIELD AND POOL, OR WILDCAT Bisti Iower Gal Ext
990' F	NL & 1650' FWL			SURVEY OR AREA
4 PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)			R. etc.)	Sec. 18, T24N-R9W
r. FBRMIL NO.	=	, a., g		
	Charle A acceptate Rev	To Indiana Make	a (Nation Domain	San Juan NM
Check Appropriate box to malegie it traffice, Report, of C				OF OTHER DIGITE MERCURIT MERCET OF:
TEST WATER SHUT-OFF	PCLL OR ALTER CA	SING	WATER SEUT-OFF	
PRACTURE TREAT	MULTIPLE COMPLET	i—i	FRACTURE TREATMENT	ALTERING CABING
SHOOT OR ACIDIZE	ABANDON®		SECOTING OR ACIDIZING	ABANDON MENT*
REPAIR WELL	CHANGE PLANS		(Other)	sults of multiple completion on Well
Other) DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical				ompletion Report and Log form.)
Isolate casing. The work Isolate casing Dump 20' of a Set packer 50 Squeeze with Drill out to	oleum desires to is k will be completed ng leak with a RBP sand o top of RBP. 00' above leak. 100 sx (118 cu.ft. RBP. Test squeeze return to production	d as follows: and packer. Ol "B" with Request as	Set RBP 50' be	
				OIL CON. DIV DIST. 3
signed hole	foregoing is true and correct	TITLE Permit	Coordinator	
(This space for Federal	or State office use)			
APPROVED BY TITLE				
CONDITIONS OF APPR	OVAL, IF ANY:	NMOCC		APPROVED
ch	*Se	e Instructions on R	leverse Side	James E. Chward
tle 13 U.S.C. Section 1 ated States any false, i	001, makes it a crime for at fictitious or fraudulent state	ny person knowingly ements or represent	and willfully to make	to any department or agency of the ryythin its jurisdiction.