

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	7. UNIT AGREEMENT NAME Rincon Unit
2. NAME OF OPERATOR Union Oil Company of California	8. FARM OR LEASE NAME Rincon Unit
3. ADDRESS OF OPERATOR P. O. Box 671 - Midland, Texas 79702	9. WELL NO. 243
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850' FSL & 1850' FWL (NE SW)	10. FIELD AND POOL, OR WILDCAT Basin-Fruitland Coal
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6577' GR
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-27-N, R-6-W
	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 COMPIETE <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) Cmt. behind 5 1/2" csg	(Other) <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.) *

Sqz'd below the 9 5/8" shoe down the 9 5/8" x 5 1/2" annulus w/150 sxs "B" neat + 2% CaCl₂ @ 15.6 ppg f/b 1.5 BFW. Pumped @ 2-1.4-.5 and 500-750#. ISIP 400#(10)300#. Cmt'd open hole from 228' to 780'.

RECEIVED

NOV 01 1989

OIL CON. DIV

WELL ?

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

SIGNED

Jeffery J. Tokarsky

TITLE

Drig. Supt.

DATE

10-13-89

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FILED FOR RECORD

*See Instructions on Reverse Side

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.

NMOCD