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Case "APPLICATION FOR PERMIT—" for such proposals.)	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	RINCON UNIT
Union Oil Co. of California	S. FARM OR LEASE NAME
2. ADDRESS OF OPERATOR	RINCON
P. O. Box 671 Vidland TV 70700	9. WELL NO.
P. O. Box 671, Midland, TX 79702 1 CONTINUE OF WELL (Report location clearly and in accordance with any State requirements.*	259
See also space 17 below ; At surface	10. FIELD AND POOL OR WILDCAT
	FRUITLAND COAL
1706 957	11. SEC., T., R., M., OR ELE. AND SURVEY OR AREA
790 FNL & 1200 FEL 14. FERMIT NO SELEVATIONS (Show whether DF. RT. CR. etc.)	Sec. 29. T-27-N. R-6-W
NA NA	12. COUNTY OR PARISH: 13. STATE
	Rio Arriba NM
Check Appropriate Box To Indicate Nature of Notice, Rep.	
	SUBSEQUENT ESPORT OF:

					
TEST WATER SHUT-OFF	1	PULL OR ALTER CASING			
SHACTURE TREAT	 -		 :	WATER SHUT-OFF	REPAIRING WELL
IL BE TREAT	·	MULTIPLE COMPLETE		FRACTURE TREATMENT	, -
SHOOT OR ACIDIZE		*BANDON*	- T		ALTERING CASING
REPAIR WELL	<u></u>	CHANGE PLANS	\overline{X}^-	SHOOTING OR ACIDIZING	ABANDON MENT*
Others				Other) Note: Report results of mui	tipie completion on Well

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.).

Change 8-5/8" Surface Casing

From: 8-5/8" 24# K-55 ST&C

8-5/8" 20# X-42 ST&C To:

(Pipe manufacturer specifications attached)

JUN2 0 1990

OIL CON. DIV. DIST. 3

APPROVED

MAY 18 1990

FOR AREA MANAGER

SIGNED Sally A Souper (This space for Federal or State office (see)	TITLE Drilling Superintendent	DATE 5/2/90
APPROVED BY	TITLE	DATE

NMCCD *See Instructions on Reverse Side

Title 18 U.S.C. Section 1901, 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.