## **UNITED STATES** DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Dec. 1973	Budget Bureau No. 42-R1424	
UNITED STATES  DEPARTMENT OF THE INTERIOR	5. LEASE SF 077972	
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME	
reservoir, Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME	
1. oil gas	Richardson	
well well other	9. WELL NO.	
2. NAME OF OPERATOR	4	
Supron Energy Corporation	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	Basin Dakota	
P. O. Box 803, Farmington, New Mexico 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	M AREA Sec. 3, T-27N, R-13N, N.M.P.N.	
AT SURFACE: 790 ft./South & 990 ft./West line	12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL: Dame as above AT TOTAL DEPTH: Same as above	San Juan New Mexico	
AT TOTAL DEPTH: Same as above	14. API NO.	

AT TOTAL DEPTH: Same as above 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,

REPORT, OR OTHER DATA

SUBSEQUENT REPORT OF:

change on Form 9-330.)

(NOTE: Report results of multiple completion or zone

15. ELEVATIONS (SHOW DF, KDB, AND WD)

5907 Gr.

REQUEST FOR APPROVAL TO: **TEST WATER SHUT-OFF** FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** ABANDON\* (other) Change name of Operato

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 name of operator from Supron Energy Corporation to Union Texas Petroleum Corporation.



Subsurface Safety Valve: Manu. and	Type	Set @ .	_

18. I hereby certify that the foregoing is true and correct TITLEField Oper. Manager DATE August 26, 1937

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: TITLE

\_ DATE ACCEPTED FOR RECORD

SEP 16 1982

\*See Instructions on Reverse Side