Form 3160-5 (November 1983) (Formerly 9-331)		JNITED STAT		SUBMIT IN TRIPI (Other instructions verse side)	I OD PA	Budget Bureau Expires Augus LEASE DESIGNATION	No. 1004-0135 t 31, 1985	
(1 01			OF LAND MANAGEMENT			SF 077972		
		CES AND REI		WELLS to a different reservo;	6.	IF INDIAN, ALLOTTE	E OR TRIBE NAME	
i. OIL GAS	7.	7. UNIT AGREEMENT NAME						
2. NAME OF OPERATOR	- 8	FARM OR LEASE NA	W#					
Union Texas Petroleum Corporation						Richardson		
3. ADDRESS OF OPERATO			9. WELL NO.					
P. O. Box 1290, Farmington, New Mexico 87499						7		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  833' FNL; 2142' FEL						10. FIELD AND POOL, OR WILLCAT		
						Basin Dakota  11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA		
· · · · · · · · · · · · · · · · · · ·			Soc 3 T27N_D13W NMDM					
14. PERMIT NO.		15. ELEVATIONS (Sho	w whether DF, RT, (	OR, etc.)	12	Sec. 3, T27N-R13W NMPM 12. COUNTY OR PARISH 13. STATE		
ب		t , 5999' G	R		9	San Juan	New Mexico	
16.	Check Ap	propriate Box To	Indicate Natur	e of Notice, Repo	ort, or Othe	r Data		
	NOTICE OF INTENT	TION TO:	I	•	BUBBEQUENT	REPORT OF:		
TEST WATER SHUT-OFF  FRACTURE TREAT  MULTIPLE COMPLETE  SHOOT OR ACIDIZE  REPAIR WELL  (Other)  PULL OR ALTER CASING  MULTIPLE COMPLETE  SHOOTING OR ACIDIZING  (Other)  WATER SHUT-OFF  FRACTURE TREATMENT  SHOOTING OR ACIDIZING  (NOTE: Report results  Completelon or Recover						REPAIRING WELL  ALTERING CASING  ABANDONMENT*  s of multiple completion on Well  letion Report and Log form.)		
1. Spudded 1 2. Drilled 1 3. Ran 7 joi 4. Cemented 9/23/84.	2-1/4" hol- 2-1/4" sur- nts 8-5/8" with 225 s Cement ci	e at 12:30 PM face hole to , 24#, K-55 c	1 9/23/84. total dept asing and 2% CaCl <sub>2</sub> a		nt dates, inclue vertical de	uding estimated day	te of starting any	
			MOV 2		0CT2	A1984  AD MANAGEMEN FEOURCE AREA	T.	
			LOW					

SIGNED S. G. (atirgis  (This space for Federal or State office use)	TITLE Petroleum Enginee		FOR RECORD	19/84
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	1101	1 <sup>DATE</sup> 984 N RESUUNUE AKÈA	·
*Se	e Instructions on Reverse Side		\^\	•••*