

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ well gas ☒ well other ☐

2. NAME OF OPERATOR
Union Texas Petroleum Corporation

3. ADDRESS OF OPERATOR
P.O. Box 1290 Farmington, New Mexico 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 794' FNL; 805' FWL
AT TOP PROD. INTERVAL: Same as above
AT TOTAL DEPTH: Same as above

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☒ RECEIVED
NOV 17 1983
☐ BUREAU OF LAND MANAGEMENT
☐ FARMINGTON RESOURCE AREA

5. LEASE
SF-080724A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Zachry

9. WELL NO.
18

10. FIELD OR WILDCAT NAME
Basin Dakota/Aztec Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 11, T28N-R10W NMPM

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5650' KB

RECEIVED
NOV 28 1983
OIL CON. DIV. 1
DIST. 3

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.)*

- 11-4-83 MIRUSU. Pull tubing and set bridgeplug at 2000' Perf P.C. 1844'-1880' w/ 1 1/2 ft. Total 19 holes. Frac P.C. w/80,000# sand in 70 quality foam down 2-7/8" tubing. Cleaned out w/drill gas, drilled BP, and cleaned out to 6449'.
- 11-10-83 Landed DK production tubing @ 6392' w/ Baker R-3 double grip packer @ 1913'. P.C. will be produced up 4-1/2" annulus.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED W. K. Cooper TITLE Manager-District Engineering DATE November 11, 1983

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE NOV 25 1983
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACCEPTED FOR RECORD
NOV 25 1983
FARMINGTON RESOURCE AREA
BY KI