

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 808, Farmington, New Mexico 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: *1650 ft./S; 720 ft./E line*
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:

☒
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☐
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☐
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☐

RECEIVED

NOV 26 1982

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

5. LEASE
SF 080724-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Zachry
9. WELL NO.
40
10. FIELD OR WILDCAT NAME
Armenta Gallup Ext.
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 10, T28N, R10W, N.M.P.M.
12. COUNTY OR PARISH
San Juan
13. STATE
New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5749 R.K.B.

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.)*

1. Spudded 14-3/4" hole at 2:30 P.M. 11/22/82.
2. Drilled 14-3/4" surface hole to total depth of 329 ft. R.K.B.
3. Ran 7 joints of 10-3/4", 40.50#, K-55 casing and set at 317 ft. R.K.B.
4. Cemented with 325 cu. ft. of class "B" with 3% CaCl₂ and 1/4 lb. of Flocele per sack. Plug down at 4:15 A.M. 11/23/82. Cement circulated to the surface.
5. Waited on cement for 12 hours.
6. Pressure-tested casing to 1000 P.S.I. for 30 minutes. Held OK.

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

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

SIGNED *Kenneth E. Roddy* TITLE *Area Prod. Supt.* DATE *November 24, 1982*

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

ACCEPTED FOR RECORD

NMOCO

*See Instructions on Reverse Side

DEC 02 1982

FARMINGTON DISTRICT

BY *SM*