

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, N.M. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790'/S; 1800'/W lines
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* ☐

SUBSEQUENT REPORT OF:

RECEIVED

AUG 23 1983

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

(other) Set meter run at pipeline tie-in point

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

SEP 1 1983

OIL CON. DIV.

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.)*
We desire to set the sales gas meter run a distance of 4203 feet from the wellhead rather than on the well pad.

This well was completed September 3, 1981 and has not yet been connected to a gas gatherer because El Paso Natural Gas has not been able to obtain the right-of-way for their preferred route.

UTP has obtained the right-of-way for an alternate (longer) route and will lay the pipeline to a point on the El Paso system, however, El Paso insists that the sales meter be located at the point at which our line ties into their line.

We request permission to do this so that this well can be connected and begin to be produced.
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED W. K. Cooper TITLE Field Oper. Mgr. DATE August 22, 1983

(This space for Federal or State office use)

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

APPROVED
AS AMENDED

*See Instructions on Reverse Side

NMOCC

AUG 30 1983
Robert Moore for
M. MILLENBACH
AREA MANAGER