UNITED STATES

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5.	LEASE	15	
	SF 077865		
6.	IF INDIAN, ALLOTTEE O	R TRIBE NAME	2
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DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	SF 077865 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 reservoir. Use Form 9–331—C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME
1. oil gas. Other well other	Albright 9. WELL NO.
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: 1946 ft./S; 1762 ft./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: SUBSEQUENT REPORT FRACTURE TREAT SHOOT OR ACIDIZE	10. FIELD OR WILDCAT NAME Undesignated Gallup 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22. T-29N. R-10W. N.M.P.1 12. COUNTY OR PARISH San Juan New Mexico 14. API NO. 14. API NO. 15. SEC. 27. T-29N. R-10W. N.M.P.1 16. Sec. 28. T-29N. R-10W. N.M.P.1 17. Sec. 29. T-29N. R-10W. N.M.P.1 18. Sec. 20. T-29N. R-10W. N.M.P.1 19. Sec. 20
FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING GEOLOGY MULTIPLE COMPLETE GEOLOGY CHANGE ZONES GEOLOGY ABANDON* GEOLOGY (other) Change proposed total depth	1983 CAMOTEN Report results of multiple completion or zone change on Form 9–330.)

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 change the total depth of this well from 6147 ft. to 6375 ft. in order to reach the base of the Greenhorn formation.

All other procedures to remain the same.

DISTRICT ENGINEER

Subsurface Safety Valve: Manu. and Typ	Set @ Ft	
18. I hereby certify that the foregoing is		
SIGNED W. K. COOPER	τιτιε <u>Field Oper. Mgr.</u>	DATE June 16, 1983
	(This space for Federal or State office use)	
	TITLE	DATE APPROVED
CONDITIONS OF APPROVAL, IF ANY:		AS AMENDED
		JUN 1 7 1983
	*See Instructions on Reverse Side	JAMES F. SIMS