

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.  
**SF-078439**

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 "APPLICATION FOR PERMIT—" for such proposals.)

7. U.S. AGREEMENT NAME

8. FARM OR LEASE NAME  
**JOHNSTON FEDERAL**

9. WELL NO.  
**NO. 14**

10. FIELD AND POOL, OR WILDCAT  
**BLANCO PICTURED CLIFFS**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
**SEC. 7-T31N-R9W**

12. COUNTY OR PARISH | 13. STATE  
**SAN JUAN | NEW MEXICO**

1.  OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
**UNION TEXAS PETROLEUM**

3. ADDRESS OF OPERATOR  
**1860 Lincoln St., #1010, Denver, Colorado 80295**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface

**SE NE (1610' FNL & 1100' FEL) SEC. 7-T31N-R9W**

14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
**6599' GR**

16. **Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> <b>COMPLETION OPERATIONS</b>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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. Perforate Pictured Cliffs from 3445-3510 with 40 holes.
2. Acidize Pictured Cliffs with 1500 gallons 7-1/2% HCL. Frac Pictured Cliffs with 75% quality foam and 95,000# sand.
3. Perforate Fruitland from 3343-3383 with 25 holes. Acidized with 2500 gallons 15% HCL. Tested Fruitland and found to be wet.
4. Squeeze Fruitland perforations from 3343-3383 with 250 sx. cement.
5. Clean out to 3522 (PBTD) and run 2-3/8" production tubing.
6. Shut well in waiting on pipeline.

**RECEIVED**  
DEC 10 1979  
U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

**JAN 9 1980**  
OIL CON. COM.  
DIST. 3

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

SIGNED *Donald B. Wells* TITLE DIST. PRODUCTION MANAGER DATE DECEMBER 5, 1979  
**DONALD B. WELLS**  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

**NMOCC**

