

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 [x] 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: 1520' FNL & 1670' FWL (SE NW)
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

5. LEASE SF 078212
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME McCord
9. WELL NO. #14
10. FIELD OR WILDCAT NAME Basin-Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T30N, R13W, NMPM
12. COUNTY OR PARISH San Juan 13. STATE N.M.
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD) 5734' Gr.

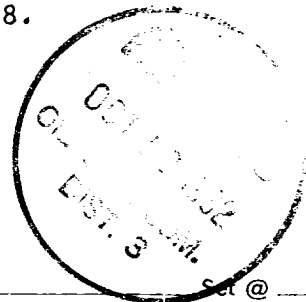
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF [] FRACTURE TREAT [] SHOOT OR ACIDIZE [] REPAIR WELL [] PULL OR ALTER CASING [] MULTIPLE COMPLETE [] CHANGE ZONES [] ABANDON* [] (other) Complete re-seeding and painting.
SUBSEQUENT REPORT OF: [] [] [] [] [] [] [] [] [] []

RECEIVED OCT 15 1982 U.S. GEOLOGICAL SURVEY FARMINGTON, N.M.

(NOTE: 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.)*

Location re-seeded with BLM seed mix #2 and above ground equipment painted with Federal Standard Brown, #595a-30318.



Subsurface Safety Valve: Manu. and Type _____ Ft.

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

SIGNED _____ TITLE Field Oper. Manager DATE 9/27/82

(This space for Federal or State office use)

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

OCT 17 1982

FARMINGTON DIST *See Instructions on Reverse Side
BY [Signature]

NMOCCA