FRACTURE TREAT SHOOT OR ACIDIZE

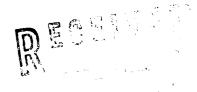
REPAIR WELL

UNITED STATES  DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	S. LEASE SF-078213  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   City of Farmington
1. oil gas Well other	9. WELL NO. 1-E
2. NAME OF OPERATOR Union Texas Petroleum Corporation	10. FIELD OR WILDCAT NAME Basin Dakota
3. ADDRESS OF OPERATOR P.O. Box 1290, Farmington, NM 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	Sec. 35, T-30N, R-13W, NMPM
AT SURFACE: 1120' f/South; 1685' f/East line AT TOP PROD. INTERVAL: Same as above	12. COUNTY OR PARISH 13. STATE New Mexico
AT TOTAL DEPTH: Same as above	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 55691 GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF	

change on Form 9-330.) PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES SEP U 1 1963 ABANDON\* (other) reseeding and painting BURERU OF LAID MAN I FRENT FARMINISTON DISCUSSE FREAL

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.)\*

On 8/23/83, reseeding was completed using BLM Seed Mix No. 2. The painting was completed using Brown Federal Standard No. 595a-30318.



(NOTE: Report results of multiple completion or zone

	i
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct  SIGNED R IV MOTTO  TITLE Area Operations DATE	ager 9/15/83
(This space for Federal or State office use)	•
APPROVED BY TITLE DA CONDITIONS OF APPROVAL, IF ANY:	TE

ACCEPTED FOR RECORD

\*See Instructions on Reverse Side

SEP 26 1983

