

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

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

Form approved.  
Budget Bureau No. 1004-0115  
Expires August 31, 1985

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>		5. LEASE DESIGNATION AND SERIAL NO. <b>NM-06738</b>
1. <b>OIL WELL</b> <input type="checkbox"/> <b>GAS WELL</b> <input checked="" type="checkbox"/> <b>OTHER</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>N/A</b>
2. <b>NAME OF OPERATOR</b> <b>Union Texas Petroleum</b>		7. <b>UNIT AGREEMENT NAME</b> <b>N/A</b>
3. <b>ADDRESS OF OPERATOR</b> <b>375 U.S. Highway 64, Farmington, New Mexico 87401</b>		8. <b>FARM OR LEASE NAME</b> <b>SANCHEZ</b>
4. <b>LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <b>1149' FSL &amp; 1176' FWL</b>		9. <b>WELL NO.</b> <b>3A</b>
14. <b>PERMIT NO.</b>		10. <b>FIELD AND POOL, OR WILDCAT</b> <b>Blanco Mesaverde</b>
15. <b>ELEVATIONS</b> (Show whether <b>FARM</b> or <b>etc.</b> ) <b>5917 GL, 5929 KB</b>		11. <b>SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b> <b>Section 34-T30N-R10W</b>
		12. <b>COUNTY OR PARISH</b> 13. <b>STATE</b> <b>San Juan NM</b>

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**JAN 12 1987**

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Cement top</u> <input checked="" type="checkbox"/>	

(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.) \*

Pleased be advised that the 7" intermediate casing was cemented to surface. 18 bbls (101 cu.ft.) of cement were circulated to the reserve pit.

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**JAN 16 1987**  
**OIL CON. DIV.**  
**DIST. 3**

I, Robert C. Frank hereby certify that the foregoing is true and correct  
SIGNED Robert C. Frank TITLE Permit Coordinator DATE 01/09/1987

**ACCEPTED FOR RECORD**

**JAN 14 1987**

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side  
**NMOCC**

BY 6-92