

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

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
SF-078505

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
N/A

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
TRIGG

9. WELL NO.
1A

10. FIELD AND POOL, OR WILDCAT
Blanco Mesaverde

11. SEC., T., R., M., OR B.L.K. AND SURVEY OR AREA
Section 25-T31N-R9W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

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.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Union Texas Petroleum

3. ADDRESS OF OPERATOR
375 U.S. Highway 64, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1800' FNL & 1120' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, BT, GR, etc.)
5962' G.L.

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) <input type="checkbox"/>	
(Other) <input type="checkbox"/>	Extend APD <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.)*

Union Texas Petroleum desires to extend the APD for this well for a period of six months past the initial expiration date of September 10, 1986. The spud date is pending partner approval.

RECEIVED
AUG 25 1987
OIL CON. DIV.)
DIST. 3

THIS APPROVAL *for 10, 1988*

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

SIGNED Robert C. Frank TITLE Permit Coordinator DATE 08/17/1987

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE AS AMENDED

CONDITIONS OF APPROVAL, IF ANY: _____ DATE AUG 20 1987

John Shella
AREA MANAGER

*See Instructions on Reverse Side