

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

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.
SF 078439

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.)

RECEIVED
IN MAIL

91 MAY 17 PM 1:05

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Union Texas Petroleum Corporation Attn: Ken White		8. FARM OR LEASE NAME Johnston Federal
3. ADDRESS OF OPERATOR P.O. Box 2120, Houston, TX 77252-2120		9. WELL NO. 29
14. PERMIT NO. 30-045-28210		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6647		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA 7-31N-9W
		12. COUNTY OR PARISH San Juan
		13. STATE NM

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"/> Completion Report	

(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.)*

5/4/91 MIRU; Swab well down to 2800'. Run 4-1/2" HSD gun w/5-SPF. Perf. 3439'-3452'

5/7/91 - Shut pipe rams & blew thru 3/4" choke w/25 psi back pressure - 580 MCF

5/8/91 through 5/10/91 - Bled down through 3/4" choke SI pressure 790-850 psi
Ran 2-7/8" tbg. to 3428' - SN @ 3428'. Shut well in @ noon 5/10/91 - WO completion procedures.

RECEIVED

JUN 5 1991

OIL CON. DIV.

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

SIGNED Ken White TITLE Reg. Permit Coordinator DATE 5/13/91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JUN 7 1991

*See Instructions on Reverse Side