

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 ☐ gas ☒ well other

2. NAME OF OPERATOR  
Union Texas Petroleum Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 808, Farmington, New Mexico 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 800 ft./N; 1080 ft./W line  
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

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) \_\_\_\_\_

SUBSEQUENT REPORT OF:

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE  
SF 078464  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Federal "A"  
9. WELL NO.  
1-E  
10. FIELD OR WILDCAT NAME  
Basin Dakota  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 25, T-31N, R-13W, N.M.P.M.  
12. COUNTY OR PARISH  
San Juan  
13. STATE  
New Mexico  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5799 ft. R.K.B.

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.)\*

It is proposed to squeeze the presently uncommercial Dakota perfs from 6654 - 6787' with 100 sacks cement. The cement across the Gallup will be evaluated with a Cement Bond Log and the interval squeezed if required. The Gallup interval 5741' - 6078' will be perforated and foam fraced if required to establish commercial production.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED William K. Cooper TITLE Field Operations Mgr. DATE 3/9/83  
WILLIAM K. COOPER

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

DATE APPROVED  
AS AMENDED

MAR 17 1983

JAMES F. SIMIS  
DISTRICT ENGINEER

\*See Instructions on Reverse Side

NMOCC