'Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. 5. Lease Serial No. NM 033775

6. If Indian, Allottee or Tribe Name	
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SÚBMIT IN TR	IPLICATE - Other instr		/. 40100A.\	7. If Unit or CA	/Agreement, Name and/or No.
1. Type of Well		D. 15.78	765	LC 028978 B	:
Oil Well Gas Well	Other Injection well		4 3	8. Well Name a	and No.
2. Name of Operator		13)	Sitt .	North Benson	Queen Unit, Well #14
United Oil & Minerals, L.P.		1 2	AFT LOG	9. API Well No). ,
3a. Address		3b. Phone No Tinclude	Bred to Ale)	30-015-10131	
1001 Westbank Dr., Austin, TX	78746	(512) 328-8184	MATERIA	1.7	ool, or Exploratory Area
4. Location of Well (Footage, Sec.,		1) (6)	974		Queen-Grayburg
Unit Letter L: 1980' FSL & 66	U FWL OI Sec. 28, 1-18-5, R	(-30-E	BEZL-1234	11. County or P	,
12 CHECK AP	PROPRIATE BOX(ES) TO				
	(ROTRIATE BOX(EB) TO			CI OKI, OK O	THERDATA
TYPE OF SUBMISSION		TY	PE OF ACTION		<u> </u>
	Acidize	Deepen	Production (Start	/Resume)	Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity
Subsequent Report	Casing Repair	■ New Construction	Recomplete	\square	Other Return to injection
	Change Plans	Plug and Abandon	Temporarily Aba	andon	service
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
following completion of the invitesting has been completed. Fin determined that the site is ready Operator reset packer and returned	olved operations. If the operation al Abandonment Notices shall b for final inspection.) ad subject inactive injection we	results in a multiple comp e filed only after all requir	letion or recompletion is	n a new interval. a	orts shall be filed within 30 days Form 3160-4 shall be filed once completed, and the operator has
14. I hereby certify that the for goin Name (PrintedlTyped)	ig is true and correct				
Mary Curliss Patton		Title Res	rulatory Coordinator		
Signature Many a	uliss Patton	Date 7/1			
	THIS SPACE I	OR FEDERAL OR S	in the state of th		in the second se
Approved by (Signature)			ime inted/Typed)	Tit	le
Conditions of approval, if any, are certify that the applicant holds leg which would entitle the applicant to	attached. Approval of this notical or equitable title to those right conduct operations thereon.	ce does not wallant of f	ffice		Date
Title 18 U.S.C. Section 1001 and Ti States any false, fictitious or fraudule	tle 43 U.S.C. Section 1212, make	e it a crime for any person as to any matter within its it	knowingly and willfully	to make to any dep	partment or agency of the United