

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPI  
(Other instructions  
verse side)

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re-

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Milnesand Unit LC060978

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Milnesand Unit

8. FARM OR LEASE NAME

9. WELL NO.

36

10. FIELD AND POOL, OR WILDCAT

Milnesand (San Andres)

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 18, T-8-S, R-35-E

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

UNION TEXAS PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR

1300 Wilco Building, Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

Unit Letter "N", 660' FSL & 1980' FWL

14. PERMIT NO.

R-3770

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

425' DF

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

CONVERT TO INJECTION WELL

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

1. Pulled 2 3/8" tubing, inspect and plastic coat internally.
2. Ran plastic coated tubing w/Injection Packer set @ 4457'.
3. Treated injection zone w/700 Gal. Para-clean and 1000 Gal. Oil sweep. Flushed w/20 Bbls. water.
4. Well ready for injection 9/9/71.

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

SIGNED F. J. M. J. J.

TITLE Operations Supt. Western Area DATE September 14, 1971

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

SEP 22 1971

\*See Instructions on Reverse Side  
GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO