

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIP. TE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Milnesand Unit LC062178

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 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 "F", 1980' FNL & 1980' FWL

14. PERMIT NO.

R-3770

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

7. UNIT AGREEMENT NAME

Milnesand Unit

8. FARM OR LEASE NAME

9. WELL NO.

56

10. FIELD AND POOL, OR WILDCAT

Milnesand (San Andres)

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

Sec. 13, T-8-S, R-34-E

12. COUNTY OR PARISH 13. STATE

Roosevelt

New Mexico

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 ☒

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

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 @ 4446'.
3. Treated injection zone w/950 Gals. Para-clean and 1500 Gal. Oil sweep.
Flushed w/20 Bbls. water.
4. Well ready for injection 9/10/71.

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

SIGNED

L. M. Larry

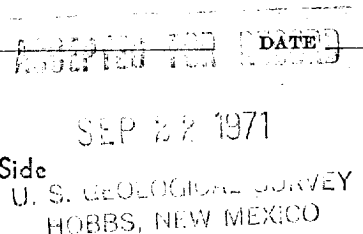
TITLE Operations Supt. Western Area DATE September 14, 1971

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE



*See Instructions on Reverse Side