

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on
reverse 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

7. UNIT AGREEMENT NAME

Milnesand Unit

8. FARM OR LEASE NAME

New Mexico Federal "P"

9. WELL NO.

520

10. FIELD AND POOL, OR WILDCAT

Milnesand (San Andres)

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

Sec. 25, T-8-S, R-34-E

12. COUNTY OR PARISH 13. STATE

Roosevelt

New Mexico

14. PERMIT NO.

R-3770

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

4224.6' GL

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) Convert to Injection Well

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

X

SUSSEQUENT REPORT OF:

WATER SHUT OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

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. Pull 2 3/8" tubing, inspect and plastic coat internally.
2. Run plastic coated tubing w/Injection Packer set @ approximately 4500'.
3. Treat Injection zone w/approximately 1000 Gal. clean sweep.
4. Place on water injection.

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

SIGNED

Rummary

TITLE District Oper. Supt. Western DATE July 19, 1971

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
JUL 22 1971

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side