

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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(Other instructio
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

RECEIVED

WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Union Texas Petroleum Corp. ✓

MAY 10 '90

3. ADDRESS OF OPERATOR

P.O. Box 2120 Houston, TX 77252-2120

O. C. D.

LOCATION OF WELL: Report location clearly and in accordance with any State requirements.
See also space 17 below.
At surface

1980 FSL & 1980 FEL Unit J

5. LEASE DESIGNATION AND SERIAL NO.

NM 0475051

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Penzoil Fed 9

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

White City Penn (Morrow)

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

9-24S-26E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

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)

REEL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANE

Change of Oper. X

SUBSEQUENT 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.) *

Effective May 2, 1990, the new operator for this property will be:

Ultramar Production Company
16825 N. Chase, Ste 1200
Houston, Texas 77060

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

SIGNED

[Signature]

TITLE Regulatory Permit Coordinator

DATE 5/2/90

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side