

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instruction
reverse side)Form approved.
Budget Bureau No. 42-R1424

NMOC - ARIZONA

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BLM - SANTA FE

SUMMARY 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.

5. LEASE DESIGNATION AND SERIAL NO.

NMO-142233

6. INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Baxter Federal

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Cato (San Andres)

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

8-T-8S, R-30-E

12. COUNTY OR PARISH 13. STATE

Chaves

New Mex.

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

UNION TEXAS PETROLEUM CORPORATION

3. ADDRESS OF OPERATOR

1300 Wilco Bldg., Midland, Texas

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

1980' FNL & 660' FEL

14. PERMIT NO.

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

4110' GL (Est.)

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) Perforate & Acidize

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

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.)*

Perforate casing from 3289'-3298', one shot per foot, and acidize with 4000 gallons 28% acid.

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

SIGNED

TITLE Office Supervisor

DATE July 3, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JUL 8 1968

J. W. SUTHERLAND
DISTRICT ENGINEER

*See Instructions on Reverse Side

RECEIVED

JUL 8 1968