

UNITED STATES **N.M.D.C.C. COPY**
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.

NM 0155494

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR UNION TEXAS PETROLEUM CORPORATION	8. FARM OR LEASE NAME Winkler Federal
3. ADDRESS OF OPERATOR 1300 Wilco Building, Midland, Texas 79701	9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 1980' FWL	10. FIELD AND POOL, OR WILDCAT Cato (San Andres)
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 22, T-8-S, R-30-E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4060' GL U. S. GEOLOGICAL SURVEY	12. COUNTY OR PARISH Chaves
	13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Well Status</u> <input checked="" type="checkbox"/>	

(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) Status of Well - Temporarily Abandoned
- (2) Date T.A. Commenced - March 1, 1969
- (3) Future Plans - Hold for Secondary Recovery
- (4) Date of Future Plans - January 1, 1976

RECEIVED

JAN 16 1975

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

D. N. PukeringTITLE Asst. Dist. Prod. ManagerDATE 1-13-75

(This space for Federal or State office use)

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL OCTOBER 1 1975*See Instructions on Reverse Side
OCT 1 - 1975APPROVED
JAN 12 1975L. C. BEEKMAN
ADJ. DIST. ENGINEER

RECEIVED

JAN 20 1975

O. C. C.
ARTESIA, OFFICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
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verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM - 0155494

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

WINKLER FEDERAL

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

CATO, SAN ANDRES

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

SEC. 22, T-8-S, R-30E

12. COUNTY OR PARISH

CHAVES

13. STATE

NEW MEXICO

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. NAME OF OPERATOR UNION TEXAS PETROLEUM CORPORATION	
3. ADDRESS OF OPERATOR 1300 WILCO, MIDLAND, TEXAS 79701	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 1980' FWL, SEC. 22, T-8-S, R-30E	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4060 est. 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) ☐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.)*

Production has declined until operation is not economical.

Evaluation studies show no additional remedial possibilities for increasing production. There are no immediate plans for secondary recovery in this field at the present time.

This well will be carried in a temporarily abandoned status, effective March 1, 1969, until secondary recovery operations are feasible.

RECEIVED

NOV 2 1970

O. C. C.
ARTESIA, OFFICE

RECEIVED

OCT 29 1970

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED: *R. L. Beekman*

TITLE OPERATIONS SUPERINTENDENT

DATE 10-27-70

(This space for Federal or State office use)

APPROVED BY
SIGNATURE OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED
OCT 30 1970R. L. BEEKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

RECEIVED

NOV - 2 1970

**OIL CONSERVATION COMM.
HOBBS, N. M.**