

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI.
(Other instructions on re-
verse side)

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

RECEIVED

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 Corp.	3. ADDRESS OF OPERATOR P.O. Box 2120, Houston, Texas 77252-2120	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 760' FNL & 660' FWL	5. LEASE DESIGNATION AND SERIAL NO. NM-63366	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME North Young Federal	9. WELL NO. 1	10. FIELD AND POOL, OR WILDCAT Young (Bone Spring) North	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, 18S-32E	12. COUNTY OR PARISH Lea	13. STATE NM
14. PERMIT NO. CER #199	15. ELEVATIONS (Show whether DF, HT, GR, etc.) 3875' GR											

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"/>
FRACURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(Other)	<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.)

Perf. & Acidize addt'l Bone Spring "E"

10/28/88

Perfed w/4" csg. gun 1 JSPF @ 8467-72' (6 holes) and 8457-62' (6 holes).

10/29/88

Acidize w/1650G 15% HCl. Set tubing @ 8477' and RKR @ 8387'.

11/01/88

Flwd well to frac tank. RIH w/prod. equip & put well to pumping.

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

SIGNED [Signature] TITLE Reg. Permit Coordinator DATE 11/04/88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: _____

ACCEPTED FOR RECORD
DATE

NOV 18 1988

*See Instructions on Reverse Side

SJS

CARISBAD, NEW MEXICO