

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 031621-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

~~H. H.~~ Britt "A"

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT

Monument Paddock

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

Sec. 6, T-20-S, R-37-E

12. COUNTY OR PARISH 13. STATE

Lea

New Mexico

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

2310' FSL & 2279' FWL

14. PERMIT NO.

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

3575' DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

REPAIR WELL

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Well Status

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<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 - February 25, 1971.

(3) Future plans - Study for possible new zone work over.

(4) Date of Future plans - September 1, 1975.

JAN 1 1976

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

SIGNED

D. H. Rukering

TITLE Asst. Dist. Prod. Manager

DATE 1-13-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

[Signature]

*See Instructions on Reverse Side