Form 9-331 (May 1963)	DEDARTM	N. STATE	S INTERIOR	SUBMIT IN TRIPLIC (Other instructions of verse side)		Forn Budg LEASE DESI	approved set Bureau GNATION A	No. 42	
	DEFARTM	OLOGICAL SU	RWOBBS OF	FICE O C C	1 -	C 0316	` '		
SU (Do not use t	INDRY NOTIC	ES AND REP	ORTS ON			. IF INDIAN,	ALLOTTEE	OR TRIB	E NAMD
(Do not use this form for proposals to drill or to deepen the plant back to differ the envir. Use "APPLICATION FOR PERMIT—" for such proposals.) 1.						7. UNIT AGREEMENT NAME			
WELL X WEL						. FARM OR L	EASE NAME		
2. NAME OF OPERATOR						Britt			
Union Texas Petroleum Corporation 3. ADDRESS OF OPERATOR						WELL NO.	, , ,		
1300 Wilco Bldg., Midland, Texas						+	n noot. OR	WILDCA	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface						Monument Grayburg 11. BEC, T., R., M., OR BLK. AND			
660' FN & 1980' FEL						Sec 7, T-20-S, R-37-E			
					i i	12. COUNTY			
14. PERMIT NO.		3565 DF	w whether DF, RT,	gr, etc.)	١_	Lea			Mexico
16.	Check Ap	propriate Box To	Indicate Natu	re of Notice, Report					
NOTICE OF INTENTION TO:						QUENT REPORT OF:			
TEST WATER SH	UT-OFF P	ULL OR ALTER CASING		WATER SHUT-OFF			PAIRING W	-	<u> </u>
FRACTURE TREAT		ULTIPLE COMPLETE		FRACTURE TREATMENT			TERING CA	1	
SHOOT OR ACIDIZ	.E) A	BANDON*		SHOOTING OR ACIDIZE	HG X	A	SANDUN MAIN		
REPAIR WELL	c	HANGE PLANS		(Other) (Note: Report Completion or l	results of	f multiple co	mpletion o	on Well m.)	
(Other)	TO OR COMPLETED OPER	ATIONS (Clearly state	all pertinent de		1.4 4-	- aludina cati	mated date	of ata	rting any
nent to this wo	rk.)*	ian, armor, gara and							
Squeezed p	perfs. 3780 foral of 24	-90' W/190 holes. T	sacks c reated w	ement. Peri	f NE	acid.	Inst	tall	ed
numning e	minment.	Potential	test - p	umped 54 BO	& 198	8 BW i	n 24 l	nrs.	
bembrii 6	1		_	-					
						-			
						-	-		
						,			
	<i></i>								
18. I hereby certify	that the foregoing is	true and correct	Acci	stant Dist.	Sunt	. 104000	3- :	2-66	
SIGNED	NOYFLAN		TITLE ASSI	.otalit DISt.	Jupi	DATE			
(This space for	Federal or State offi	ce usej					_		
APPROVED BY	OF APPROVAL, IF A	NY:	TITLE		1.	DATE	,	<u> </u>	
CONDITIONS	A Tributan, in a				,			-	
						MAR	∃ 1960)	

*See Instructions on Reverse Side