(Formerly 9-331) DEPARTMENT OF THE INTERIOR (Other instructions on re- BUREAU OF LAND MANAGEMENT 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.)					6. 11	5. LEASE DESIGNATION AND STRIAL <u>LC-031621-A</u> 6. IF INDIAN, ALLOTTER OF TREES N		
ī	Use "APPLICATIO	N FOR PERMIT_"	or plug back for such propos	to a different reservoir.				
2. NAME OF OPERATOR						7. UNIT AGREEMENT NAME		
	Union Texas Pet				8. 74	EN OR LEA	SE NAME	
3. ADDRESS OF OPERA	TOR	roreum corp.				Britt		
P.O. Box 2120 Houston, TX 77252-2120 LOCATION OF WELL (Report location clearly and in accordance with any State requirements." At surface					9. 11	9. WBLL NO. 13		
See also space 17 At surface	below.)	and in accordance	with any State	requirements.*	10. 7	IELD AND P	OOL, OR WI	LBCAT
						Eunice	e Monum	ent G
1650' FEL & 2310' FSL					11. #1	11. SBC., T., R., M., OR RLE. AND SURVEY OR AREA		
14. PERMIT NO.	15.	ELEVATIONS (Show w	hether pr m				-205-3	
			2' GR	K, E(C,)		Lea	ARISE 18.	
l 6.	Check Approp			of Notice, Report,		.ca		NM
	/	NO :			OF Other D			
TEST WATER SHOT	-OFF PCLL O	ALTER CASING		WATER SHUT-OFF		ORT OF:		
FRACTURE TREAT Shoot or acidize	¥ULTIP	LE COMPLETE		FRACTURE TREATMENT			UNG WELL	
REPAIR WELL	ABANDO		_	SHOOTING OR ACIDIZING			ING CARING	
(Other)	CHANGE	PLANS	_	(Other)	·		NNENT+	
. DESCRIBE PROPOSED	OR COMPLETED OPPO	L		(Nots: Report re Completion or Rec	sults of multi	ple comple	tion on W	
	pandonment proc			(Note: Report re Completion or Rec ls. and give pertiment d id measured and crue vo - Request exter				tarting a sones per
								RECEIVE
At I bereby certify that t		edure approv	red 9/88	- Request exter		n 1 yea	0cr 6	RECEIV
At I hereby certify that the SIGNED AM	bandonment proc	edure approv	red 9/88			1 yea	r. Oct 6 11 14 11 189	RECEIV
At I hereby certify that e SIGNED July (This space for Federa	the foregoing is true and William	edure approv	red 9/88	- Request exter	nsion for	1 yea	r. Oct 6 11 14 11 189	RECEIV
Thereby certify that the second secon	the foregoing is true and and or State office use)	edure approv	red 9/88	- Request exter	nsion for	1 yea	r. Oct 6 11 14 11 189	RECEIVED