

NEW MEXICO OIL CONSERVATION COMMISSION

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TRIBUTION		
FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State ☐ Patented Fee ☐
5. State Oil & Gas Lease No.

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- 2. Name of Operator Union Texas Petroleum Corporation 3. Address of Operator 1300 Wilco Building, Midland, Texas 79701 4. Location of Well UNIT LETTER I, 1,980 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 23 TOWNSHIP 22-S RANGE 37-E NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 3318 DF 7. Unit Agreement Name 8. Farm or Lease Name Lee 9. Well No. 1 10. Field and Pool, or Wildcat Blinebry 12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Casing Pressure Inspection <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER Casing Pressure Inspection <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

The cellar of this well has been dug out. A riser has been installed from the braden head to the surface above ground level and the casing pressure can now be check from the surface.

Well is now ready for re-inspection.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>Stanley A. Jost</u>	TITLE <u>Gas Measurement Analyst</u>	DATE <u>8-28-75</u>
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		