Form 9-331 (May 1963)				TE•	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO.	
	DEPARTMELL OF THE INTERIOR (Other Instruction Termediate) GEOLOGICAL SURVEY				NM 0371175	
(Do not use th	NDRY NOTICES	AND REPORTS O rill or to despen or plug bac OR PERMIT—" for such proj	N WELLS ck to a different reservoir. posals.)		6. IF INDIAN, ALLOTTEE	OR TRIBE NAME
1. OIL GAS	OTHER			-	7. UNIT AGREEMENT NAM	ME
		8. FARM OR LEASE NAME				
2. NAME OF OPERATOR					Union "1" Federal	
Union Oil Company of California					9. WELL NO.	
3. ADDRESS OF OPERATOR					1	
P.O. Box 671 - Midland, Texas 79701 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*					10. FIELD AND POOL, OR WILDCAT	
4. LOCATION OF WELL (Report location clearly and in accordance with any size of the second se					Triple X Delaware	
	& 1980' FEL				11. SEC., T., E., M., OE B BURVEY OR AREA Sec. 1, T-24S,	R-32E
14. PERMIT NO.	15. E	15. ELEVATIONS (Show whether DF, RT, GR, etc.)			12. COUNTY OR PARISH	j
AT. EMBAGEA AND.		3581.8' GR			Lea	N. Mex.
16.	Check Appropri	ate Box To Indicate No	ature of Notice, Report,	, or O1	her Data	
					UENT REPORT OF:	
TEST WATER SHU Fracture treat Shoot or acidize	MULTIPI	ALTER CASING	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZIN	IG .	REPAIRING V Altebing CA Abandonme: Dg. 1991	ASING
REPAIR WELL	BHOOT OB ACIDIZE ABANDON* REPAIR WELL CHANGE PLANS (Nore: Report results of multiple completion on Well					on Well
(Other)			Completion or K	lecomple	tion Report and Log 101	ш.)
17. DESCRIBE PROPOSEI proposed work. nent to this wor	II well is directionally d	5 (Clearly state all pertinent rilled, give subsurface locati	details, and give pertinent ons and measured and true	dates, l vertical	ncluging estimated dat depths for all markers	e or starting and s and zones perti

Spudded 12¹/₂" hole @ 4 PM, 4-23-74, & drilled to 413'.

Ran & cemented 398.52' 8-5/8", 32#, K-55 casing @ 410' with 300 sx Class "C" cement w/2% CaCl₂. Cement circulated to surface. WOC 18 hours. Tested casing & BOP to 1500 psi for 30 minutes - OK.

8. I hereby certify shat the foregoing is true and correct SIGNED mmie Mappe	TITLE District Drilling Supt. Dare June 13, 1974
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY :	TITLE I TOTA DET
*Se	ee Instructions on Reverse Stide To LONDAL STICO