

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-K1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-12281-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME Hagood Unit
2. NAME OF OPERATOR BTA OIL PRODUCERS	8. FARM OR LEASE NAME 7608 JV-P Hagood
3. ADDRESS OF OPERATOR 104 South Pecos Midland, Texas 79701	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FEL & 990' FNL	10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 2959' GL
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, 26-S, 35-E
	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

Spud &amp; Casing

~~XXXXXX~~FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(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.)\*

8/11/76 Spudded 3:00 A.M. Drlg 26" Hole in Sand & Gravel.8/17/76 Cmdtd 20" OD 94# H-40 ST&C Csg. @900' w/950sx Cl-C & 200sx Cl -H-. Cmt Circulated, WOC.8/18/76 Tested 20" & BOP's w/1500psi for 30 min. OK. Drlg ahead.9/10/76 Cmdtd 13-3/8" 61,68&72# csg @5050' w/13,500sx Cl-C- & 200sx Cl-H-. Circ. 83sx. WOC.9/12/76 Tested 13-3/8" & BOP's w/1500 psi for 30 min. OK.9/15/76 DST #1 from 5050' to 5170'. Salt Wtr. sampler @50 psi recovered 2000cc salt wtr 215,000 ppm chloride.9/16/76 Drlg Ahead.

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

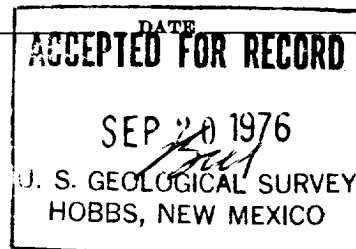
SIGNED Bob Newland Bob Newland TITLE Regulatory Supervisor DATE 9/17/76

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

\*See Instructions on Reverse Side



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2. NAME OF OPERATOR

BTA OIL PRODUCERS

3. ADDRESS OF OPERATOR

104 South Pecos Midland, Texas 79701

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See also space 17 below.)  
At surface

1980' FEL &amp; 990' FNL

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2959' GL

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