

PROJECT 10073 RECORD CARD

1. DATE OF SIGHTING 10/1/52		2. LOCATION Big Springs, Texas	12. CONCLUSIONS <input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon <input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical <input type="checkbox"/> Other <input checked="" type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown	
3. DATE OF REPORT 10/1/52	4. TYPE OF OBSERVATION <input type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar	5. SOURCE AF pilot		
6. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. LENGTH OF OBSERVATION	8. NUMBER OF OBJECTS 1	9. COURSE N	
10. BRIEF SUMMARY OF SIGHTING 300 MPH.		11. COMMENTS Very poor report.		

1. ATIAA  
2. ATIA  
3. C. Files

**ACTION**

1952 AUG 10 08 17

56

10 Aug 52 10 56

ATIC

WFCB

RA223

WP211

YDD03

TYE14

TDA011

JEPHQ 3308

FM JEDEN JEDWP JEPLG 333

DE JEPHQ 03A

P 180308Z ZNJ

FM HQ USAF WASHDC

TO JEDEN/CG AIRDEFCON ENT AFB COLO

JEDWP/CHIEF ATIC WRIGHT PATTERSON AFB OHIO

JEPLG/CGTAC LANGLEY AFB VA

~~REDACTED~~ FROM AFOIN 55919 FLYOBRPT. ATTN: CMA ATIAA-2C.  
FOLLOWING INFO RECEIVED FR FLT SERVICE CENTER CMA OLMSTEAD AFB PA.  
BY TELEPHONE CLN AF ACRFT NR 4967 TYPE T-6 PLT ~~REDACTED~~ CMA  
HOME STA BIG SPRINGS CMA TEX REPORTED OVER ABI 1652C 3000 FT VFR CMA  
EST TIME OVER BGS 1745C. AT 1652C PLT ADVISED CMA QUOTE. SIGHTED  
UNUSUAL OBJECT. PASSED ME WEST BOUND AT TERRIFIC SPEED THREE MINUTES  
AGO. EST ALT 15000 FT. SPEED ESTIMATED EXCESS OF 500 MPH. OBJECT NOT  
JET. NO WINGS. UNABLE TO DESCRIBE AS TO COLOR OR SHAPE. UNQUOTE.  
INFO WAS RELAYED TO ELP AND FTW ARTC. OLMSTEAD RECEIVED BY TELETYPE  
FR MAXWELL AFB FLT SERV CENTER.

13/0313Z AUG JEPHQ

Cy 1

7-3719-11

## PROJECT 10073 WORKSHEET

## I. GENERAL

1. DATE 12 Aug 52	2. LOCATION Big Spring, Tex.	3. TIME Local: 1649 Zebra: 2149
4. WAS OBJECT OBSERVED FROM THE GROUND?	<input type="checkbox"/> Yes <input type="checkbox"/> Naked Eye <input type="checkbox"/> Binoculars <input type="checkbox"/> Telescope <input type="checkbox"/> Theodolite	<input checked="" type="checkbox"/> No
5. WAS OBJECT OBSERVED BY GROUND RADAR?	<input type="checkbox"/> Yes <input type="checkbox"/> By One Set <input type="checkbox"/> By Two Sets <input checked="" type="checkbox"/> By Three Sets	<input type="checkbox"/> No
6. WAS OBJECT OBSERVED FROM THE AIR?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> A/C Observed Object <input type="checkbox"/> Interception Attempted <input checked="" type="checkbox"/> No Intercept Attempted	<input type="checkbox"/> No
7. WERE AIRCRAFT SCRAMBLED TO INTERCEPT?	<input type="checkbox"/> Yes <input type="checkbox"/> A/C Scrambled <input type="checkbox"/> Visual Contact Made <input type="checkbox"/> A/I Contact Made <input type="checkbox"/> No Contact Made	<input checked="" type="checkbox"/> No
8. DID OBJECT CHANGE DIRECTION AT ANY TIME?	<input type="checkbox"/> Yes <input type="checkbox"/> Normal <input type="checkbox"/> Violent	<input checked="" type="checkbox"/> No
9. IF OBJECT WAS A "LIGHT", WAS IT:	<input type="checkbox"/> Blinking <input checked="" type="checkbox"/> Steady	
10. LENGTH OF TIME IN SIGHT:	<input type="checkbox"/> 1-15 Seconds <input type="checkbox"/> 1-5 Minutes <input type="checkbox"/> Over 10 Minutes	unk.
11. REPORTING AGENCY (Unit Number and Mailing Address) HQ, USAF		

## II. ASTRONOMICAL DATA

12. WHAT ASTRONOMICAL ACTIVITY WAS NOTED? None		
13. DID OBJECT APPEAR TO ARCH DOWNWARD?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14. DID OBJECT HAVE A TAIL?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15. DID OBJECT APPEAR TO DISINTEGRATE?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16. TIME OF SIGHTING RELATIVE TO SUNRISE OR SUNSET (Data From Air Almanac) <input type="checkbox"/> Night <input type="checkbox"/> Day <input type="checkbox"/> Sunrise <input type="checkbox"/> Sunset		

## III. AIRCRAFT DATA

17. WERE AIRCRAFT NOTED IN AREA?	<input type="checkbox"/> Yes <input type="checkbox"/> One Aircraft <input type="checkbox"/> More Than One Aircraft	<input type="checkbox"/> No
18. WAS ANY SOUND HEARD?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
19. WERE THERE INDICATIONS OF HIGH BACKGROUND NOISE?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
20. WAS THE OBJECT VIEWED ABOVE 45° ELEVATION?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

IV. BALLOON DATA

21. WERE BALLOONS RELEASED IN AREA?  Yes  No

22. TIME SINCE SCHEDULED BALLOON RELEASE: \_\_\_\_\_ Minutes

23. POSSIBLE BALLOON LAUNCH SITES DOWNWIND OF SIGHTING:

	Location	Type	Launching Agency	Lighted?		Describe Lighting
				Yes	No	
a.						
b.						
c.						
d.						

(attach overlay)

V. EVALUATION

<p>21. EVALUATION OF SOURCE:</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Fair</p> <p><input type="checkbox"/> Poor</p> <p><input type="checkbox"/> Unreliable</p> <p><input type="checkbox"/> Extremely Doubtful</p> <p><input type="checkbox"/> Hoax</p>	<p>22. DETAILS OF REPORT:</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Fair</p> <p><input checked="" type="checkbox"/> Poor</p> <p><input checked="" type="checkbox"/> Insufficient to Evaluate</p>		
<p>23. FINAL EVALUATION:</p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Was Balloon  <input type="checkbox"/> Probably Balloon  <input type="checkbox"/> Possibly Balloon   <input type="checkbox"/> Was Aircraft  <input type="checkbox"/> Probably Aircraft  <input type="checkbox"/> Possibly Aircraft                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Was Astronomical  <input type="checkbox"/> Probably Astronomical  <input type="checkbox"/> Possibly Astronomical   <input type="checkbox"/> Other: _____  <input checked="" type="checkbox"/> Insufficient Data For Evaluation   <input type="checkbox"/> Unknown                 </td> </tr> </table>		<input type="checkbox"/> Was Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon  <input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft	<input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical  <input type="checkbox"/> Other: _____ <input checked="" type="checkbox"/> Insufficient Data For Evaluation  <input type="checkbox"/> Unknown
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<p>24. COMMENTS: <i>no detail</i></p>			