

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLES
(Other instructions
reverse side)

E*
re-

Form approved.
Budget Bureau No. 42-R1424.

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 GAS WELL OTHER Salt Water Disposal

2. NAME OF OPERATOR
TEXACO Inc.

3. ADDRESS OF OPERATOR
P.O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
Well is located 1,651' from the South Line and 660' from the East Line of Section 34, T-20-S, R-34-E, Unit Letter I

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
Regular 3,760' DF

5. LEASE DESIGNATION AND SERIAL NO.
LC-029519(a)

6. IF INDIAN ALLOTTEE OR TRIBE NAME
None

7. UNIT AGREEMENT NAME
None

8. FARM OR LEASE NAME
B. V. Lynch 'A'

9. WELL NO.
3

10. FIELD AND POOL, OR WILDCAT
Lynch

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 34, T-20-S, R-34-E

12. COUNTY OR PARISH 13. STATE
Lea New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	

(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.)*

TEXACO Inc. proposes to do the following work on subject well;

1. Run perforating gun through 2-3/8" OD internally plastic coated tubing and perforate 5-1/2" casing with 1 JSPF from 3,586'-3,611' and 3,642' - 3,662'.
2. Pump 1500 gal 15% NE Acid.
3. Return to salt water disposal.

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

SIGNED *[Signature]*

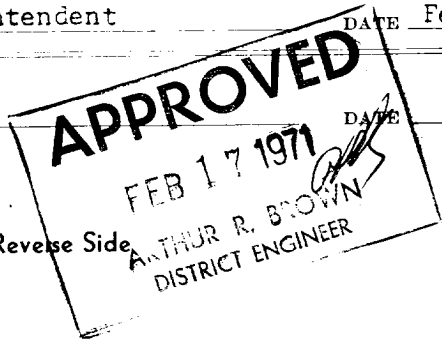
Assistant District
Superintendent

DATE February 12, 1971

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____



*See Instructions on Reverse Side