

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLI
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM-0250

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR TEXACO Inc.		8. FARM OR LEASE NAME K.F. Quail Federal	
3. ADDRESS OF OPERATOR P.O. Box 728 - Hobbs, New Mexico 88240		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 600' FNL and 600' FWL, Section 1, T-20-S, R-34-E		10. FIELD AND POOL, OR VILLAGES Lea Bone Spring	
14. PERMIT NO. Regular		15. ELEVATIONS (Show whether BP, EP, GR, etc.) 3697' GR	
		12. COUNTY OR PARISH Lea	13. STATE New Mexico

NOV 30 1970

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 type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)*

Total Depth 9800'
8-5/8" OD casing cemented at 4050'

The following work has been completed on subject well:

- Spot the following 100' plugs.
9300' - 9400' 30 sx.
8000' - 8100' 30 sx.
6100' - 6200' 30 sx.
5050' - 5150' 30 sx.
4700' - 4800' 30 sx.
4000' - 4100' 30 sx. (across 8-5/8" casing at 4050')
1800' - 1900' 30 sx. (in 8-5/8" casing)
- Spot 10 sx. cement at surface (20').
- Install 4" marker extending 4' above ground level.
- Clean location. Well plugged and abandoned November 13, 1970.

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

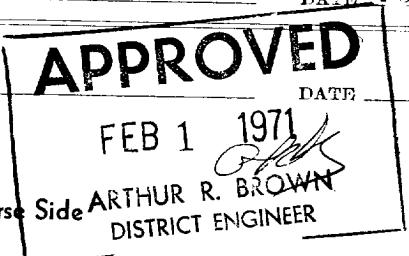
SIGNED [Signature]
(This space for Federal or State office use)

Assistant District
TITLE Superintendent

DATE November 13, 1970

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side