

NEW MEXICO OIL CONSERVATION COMMISSION

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TRIBUTION		
FE		
FILE		
U.S.S.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name U.D. Sawyer
3. Address of Operator P.O. Box 723 - Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER A 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 34 TOWNSHIP 9-S RANGE 36-E N.M.P.M.	10. Field and Pool, or Wildcat Crossroads Siluro Devonian
15. Elevation (Show whether DF, RT, GR, etc.) 4020' DF	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
Acidize ☒

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Pulled Reda pump and tubing.
2. Ran 2-3/8" tubing and packer set @ 4100'. Treated perforations 12126-50 w/500 gals. corrosion inhibitor mixed w/20 Bbls. lease crude and followed w/300 Bbls. lease crude.
3. Acidized w/2000 gals. 2% FE acid, displaced w/200 Bbls. formation water.
4. Ran tubing and Reda pump set @ 1800', returned to production.
5. On 24 hour test, 5-4-74, pumped 25 BNO, 2714 BSW, gravity 41.1 degrees, GOR TSTM.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Asst. Dist. Supt. DATE 5-7-74
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: