

- N. M. O. C. & CORN  
**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

Copy to S. F.  
SUBMIT IN DUPLICATE\*  
(Other instructions on reverse side)

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Water Injection well.</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>NM-08529</u>	
2. NAME OF OPERATOR <u>TEXACO Inc.</u>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <u>NONE</u>	
3. ADDRESS OF OPERATOR <u>P. O. Box 728 - Hobbs, New Mexico</u>		7. UNIT AGREEMENT NAME <u>Square Lake "31" Unit</u>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>Well located 660' from the West Line, and 1980' from the South line of Section 31, T-16-S, R-30-E, Eddy County, New Mexico.</u>		8. FARM OR LEASE NAME <u>Square Lake "31" Unit</u>	
14. PERMIT NO. <u>Regular</u>		9. WELL NO. <u>1331</u>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3712' (D. F.)</u>		10. FIELD AND POOL, OR WILDCAT <u>Square Lake</u>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 31, T-16-S, R-30-E</u>	
		12. COUNTY OR PARISH <u>Eddy</u>	13. STATE <u>N. M.</u>

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Converted to Water Injection</u> <input checked="" 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.)\*

The following work has been completed on subject well.

1. Rig up pulling unit, perforate 4 1/2" Casing with two jet shots per foot from 2682' to 2687', and 2697' to 2702'. Set baker retrievable plug at 2710'. Spot 500 gals 15% regular acid. Frac with 10000 gals gelled fresh water, with 10000 lbs sand, average injection rate, 10.7 BPM. Pull retrievable bridge plug, clean hole with sand pump.
2. Ran 82 joints of 2" plastic coated tubing with baker tension packer set at 2655'.
3. Total depth - 2765', well prepared for water injection.

**RECEIVED**

OCT 20 1964

O. C. C.  
ARTESIA, OFFICE

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

SIGNED R. D. Raymond  
(This space for General or State office use)

TITLE Assistant District Superintendent

DATE October 13, 1964.

APPROVED BY [Signature]  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side