

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TR CATE\*  
(Other instruct. on re-  
verse side)COPY to SJ  
Form approved.  
Budget Bureau No. 42-1424.

## 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"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-028978-B	
2. NAME OF OPERATOR TEXACO Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME North Benson Queen Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  Well is located 1820' FNL & 820' FWL of Section 34, T-18-S, R-30-E, Unit Letter 'E', Eddy County, New Mexico		8. FARM OR LEASE NAME North Benson Queen Unit	
14. PERMIT NO. Regular		9. WELL NO. 40	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3446' (GR)		10. FIELD AND POOL, OR WILDCAT M Benson Queen Grayburg North	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
		12. COUNTY OR PARISH Eddy	13. STATE New Mexico

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☒(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(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.)\*

1. Rig up. Pull rods & pump. Install BOP. Pull tubing.
2. Set packer @ 2760'. Spot acid over perforations 2845'-3082'.
3. Acidize perforations w/2000 gal. 15% NE Acid. Swab well.
4. Treat w/55 gal. scale inhibitor mixed w/275 gal. treated fresh water.
5. Flush w/50 Bbl. treated fresh water.
6. Run pumping equipment. Test & return to production.
7. On 24 Hr. PT ending 7-21-76, well pumped 19 BO & 7 BW, GOR TSTM.

RECEIVED

JUL 28 1976

U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED

TITLE Assistant Dist. Supt.

DATE 7-23-76

(This space for Federal or State office use)

APPROVED BY

TITLE ACTING DISTRICT ENGINEER

DATE JUL 28 1976

CONDITIONS OF APPROVAL, IF ANY: