Form 9-331	N. ₩ -9. C. C. COP¥ L . TED STATES	SUBMIT IN TR CAT	E• Form approved. Budget Bureau No. 42-R1424.
May 1963) D	EPARTMENT OF THE INTE GEOLOGICAL SURVEY		5. LEASE DESIGNATION AND BERIAL NO. NM-033775
			6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDR (Do not use this form Use	NONE		
			7. UNIT AGREEMENT NAME
WELL X GAS WELL	OTHER		NONE 1
NAME OF OPERATOR			8. FARM OR LEASE NAME
	TEXACO Inc.	, 	L.R. Manning Fed"B"NCT-
ADDRESS OF OPERATOR	P. 0. Box 728 - Hob	bs, New Mexico	14
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL, OB WILDCAT
At surface Well located 19 West Line of Se	980' from the North Line, ection 28, 18-S, 30-E, Ed	and 1980' from the Idy County, New Mexico	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 28, 18-S, 30-E
4. PERMIT NO.	15. ELEVATIONS (Show wheth	er DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
Regular	3445' (D. F.)		Eddy N.M.
6.	Check Appropriate Box To Indicat	te Nature of Notice, Report, o	r Other Data
NOTI	CE OF INTENTION TO :	SUB	SEQUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	X REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	ults of multiple completion on Well mpletion Report and Log form.)
350 Sx regul	Spudded 9 7/8 Decemb 7" O. D. Casing (24 LB. (ar neat. Plug at 528'.	Depth -558' B" hole 7:00 P.M. Der 19, 1963 Grade C NEW) and cemen Cement Circulated. J	ted at 558 with ob complete 9:30
A. M. Decemb	er 20, 1963.		
	D. Casing for 30 minutes		20m 9•30 4 M
December 21.	1963. Tested O. K. Dr: 600 P. S. I. from 12:30	illed cement plug and	retested for 30
Tested O. K.	Job complete 1:00 P. M	. December 21, 1963.	
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	,	the fail of the	
1	/~n	and the AFFICE	
8. I hereby certify that the	Foregoing is true and correct		
SIGNED		Assistant District	DATE December 30, 19
(This space for federal	Blevins, Jr	Superintendent	en e
(This space for bearing	or locator onice ase)		
APP (E) BY	TITLE .		DATE
DEGUNDATIONS OF APPR	TITLE		international de la serie de la serie Nome de la serie de la serie Altre de la serie
1 IN 2 10-11	k,		
JAN 2 H. L. BEE. CMAN H. L. BEE. CMAN	*Cas Instance	tions on Reverse Side	
R. L. STRICT EN	Jee Instruc	IIVIS UILIVEARISE SIGE	
JAN 2 LANAN R. L. BEE. CHANN ACTING DISTRICT ENGINE			
NT.#			