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Form 9-331 (May 1963)	UNITED STATES DEPARTMENT OF THE II GEOLOGICAL SUR	on re- 5. LEASE DESIGNATION AND	E* Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO. NM 033775			
(Do not use this f	ORY NOTICES AND REPO	6. if indian, allottee (None	Copy			
WELL A GAS WELL	OTHER		7. UNIT AGREEMENT NAME	3		
2. NAME OF OPERATOR		8. FARM OF LEASE NAME	8. FARM OR LEASE NAME			
TEXACO Inc. 3. ADDRESS OF OPERATOR	V	L.R.Manning Fed	PRU NOT-1			
	700 Halls N N	9. WELL NO.	<u></u>			
4. LOCATION OF WELL (Re	728, Hobbs, New Mexico	13				
	port location clearly and in accordance v	10. FIELD AND POOL, OR W	ILDCAT			
Sec 28, T-18-S, R			North Benson Queen			
660' from the sou	th line and 660' from th	II. SEC., T., R., M., OR BLK SUBVEY OR AREA	11. SEC., T., R., M., OR BLK. AND SUBVEY OR AREA			
			Sec 28, T-18-S	Sec 28, T-18-S, R-30-E		
14. PERMIT NO.	15. ELEVATIONS (Show wh	nether DF, RT, GR, etc.)	12. COUNTY OR PARISH 1			
Regular	Unknown		Eddy	New Mexico		
16.	Check Appropriate Box To Indi					
NO.	Check Appropriate Box To Indi	cale Inditire of Inotice, Report	, or Other Data	*		
TEST WATER SHUT-OFF		S	UBSEQUENT REPORT OF:	•		
FRACTURE TREAT	PULL OR ALTER CASING	WATER SHUT-OFF	X REPAIRING WEL	د. []		
SHOOT OR ACIDIZE	MULTIPLE COMPLETE	_ FRACTURE TREATMENT	ALTERING CASIN	G		
REPAIR WELL	CHANGE PLANS	SHOOTING OR ACIDIZIN	ABANDONMENT*			
(Other)		(Other)	results of multiple completion on l	Wall		
17. DESCRIBE PROPOSED OR CO	MPLETED OPERATIONS (Clearly state all r ell is directionally drilled, give subsurfa	Completion or Repertment details, and give pertinent	results of multiple completion on vecompletion Report and Log form.)			
nent to this work.) *	in is directionally drilled, give subsurfa	ce locations and measured and true	vertical depths for all markers and	starting any d zones perti-		
		TD 575'				
	Spudded 9-7/8" hole 5:	30 AM December 6, 196;	3.			
Ran 563' of 7" OD Plug at 543', Cem	(24# grade C New) casin ent circulated. Job.com	g cemented at 575' with pleted at 9:00 AM Dece	th 300 sx of Regular ember 7, 1963.	neat cement.		
Tested OK. Drille	asing for 30 minutes fro ed plug and retested for Job complete 10:30 AM.	30 minutes from 10:00				
			NILL NILL NILL NILL SCOLONIA SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA NILL SCOLONIA SCOL	CEIVED		
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		Li .	N OF WE	C 1 2 1963		
			Y 0 3			
		• \)•	ARTE	SIA, OFFICE		
	11	c ³		" UFFICE		
18. I hereby certify that the	foregoing is true) and correct	J.	18			
SIGNED	TITLE.	Assistant Dist. Supt	t. DATE December	9, 1963.		
(This space for Federal o	r State office use)					
APPROVER BY	TITLE .		·····································			
PP 1 190	VAL, UF ANY:		DATE			
OY' '1'	-3					
T GEC L AMANN				-		
H DEC 1 L DECLARMAN	*See Instruct	tions on Reverse Side	na Secondaria Reference			
TIN-						