

N. M. O. C. C. OFF
UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLIC/
(Other instructions on
verse side)

Copy to 51
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 or a different recovery.
Use "APPLICATION FOR PERMIT—" for such proposals.)

<p>1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER</p> <p>2. NAME OF OPERATOR TEXACO Inc.</p> <p>3. ADDRESS OF OPERATOR P. O. Box 728 - Hobbs, New Mexico 88240</p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL & 1980' FEL of Section 28, T-18-S, R-30-E, Eddy County, New Mexico.</p> <p>14. PERMIT NO. Regular</p>		<p>5. LEASE DESIGNATION AND SERIAL NO. LC-028978 (a)</p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME -</p> <p>7. UNIT AGREEMENT NAME -</p> <p>8. FARM OR LEASE NAME L.R. Manning Fed. A</p> <p>9. WELL NO. 4</p> <p>10. FIELD AND POOL, OR WILDCAT North Benson Queen G.B</p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 28, T-18-S, R-30-E</p> <p>12. COUNTY OR PARISH Eddy</p> <p>13. STATE New Mexico</p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3439' (GR)</p>		

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input 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.)*

1. Set CIBP at 2600' with 35' (3 sx) cement on top.
2. Load hole with mud (25 sx gel per 100 bbls. water, brine or produced, wherever possible).
3. Cut 4-1/2" casing at 2200' and pull.
4. Spot 100' (30 sx) cement plug across casing stub.
5. Spot 100' (30 sx) cement plug at 1500'.
6. Spot 100' (30 sx) cement plug across surface casing shoe at 517'.
7. Spot 20' (5 sx) cement plug at surface.
8. Install marker and clean location.

RECEIVED

MAR 17 1977

**U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO**

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

SIGNED 	TITLE Asst. District Supt.	DATE 3-16-77
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(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

MAR 21 1977

ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side