

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN 1 LICATE\*  
(Other instructions on re-verse side)

Form approved.  
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM-033775

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NONE

7. UNIT AGREEMENT NAME

NONE

8. FARM OR LEASE NAME

L.R. Manning Fed "B" NCT-1

9. WELL NO.

16

10. FIELD AND POOL, OR WITHIN

North Benson Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 27, T-18S, R-30E

12. COUNTY OR PARISH

Eddy

13. STATE

N. M.

1.

OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728 - Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\* See also space 17 below.)  
At surface

2310' from the North Line, and 560' from the West Line, of Section 27, T-18S, R-30E, Eddy County, New Mexico.

14. PERMIT NO.

Regular

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

Unknown

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.)\*

Total Depth - 3400'

7 5/8" O. D. Casing Cemented At 550'

Ran 3390' of 4 1/2" O. D. Casing, 9.50 LB, J-55, NEW, and cemented at 3400' with 350 Sx. Class "C" cement, 10% salt. Plug at 3388'. Job complete 3:30 A. M. April 4, 1964.

Tested 4 1/2" O. D. Casing for 30 minutes with 1500 P. S. I. from 4:00 A. M. to 4:30 A. M. April 5, 1964. Tested O. K. Drilled cement plug and re-tested for 30 minutes with 1500 P. S. I. from 6:30 A. M. to 7:00 A. M. April 5, 1964. Tested O. K. Job complete 7:00 A. M. April 5, 1964.

RECEIVED  
APR 8 1964  
O. C. C.  
ARTESIA. OFFICE

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

SIGNED

H. D. Raymond

TITLE Assistant District Superintendent

DATE April 6, 1964.

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE