

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☐ other ☒ Water Injection

2. NAME OF OPERATOR
TEXACO Inc. ✓

3. ADDRESS OF OPERATOR
P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1980' FEL
AT TOP PROD. INTERVAL: Unit Letter 'J'
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
LC-068402

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
RECEIVED

7. UNIT AGREEMENT NAME
North Benson Queen Unit

8. FARM OR LEASE NAME
North Benson Queen Unit

9. WELL NO.
12

10. FIELD OR WILDCAT NAME
North Benson Queen Grayburg

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 29, T-18S, R-30E

12. COUNTY OR PARISH
Eddy

13. STATE
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3453' (DF)

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) To: Squeeze water leak

RECEIVED
DEC 5 1979
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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. Run tracer survey from 3167' to approx 2400'.
2. Rig up. Pull tubing and pkr.
3. Set RBP @ 2600' & dump 20' sand on plug.
4. Log well from 2600' - surface.
5. Perforate 5-1/2" csg above top of cement. Set cement retainer above perforations.
6. Squeeze w/350 sx. light cement containing 10# salt per sx & follow w/150 sx Class C cement. WOC. DOC & test. Pull RBP.
7. Run injection equipment. Return to production.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED George H. Stewart TITLE Asst. Dist. Supt. DATE 11-30-79

(This space for Federal or State office use)

APPROVED BY GEORGE H. STEWART ACTING DISTRICT ENGINEER DATE DEC 05 1979

CONDITIONS OF APPROVAL, IF ANY: