| | IN. IVI. U. U. U. UUPY | | | V | |
|---|---|--|--|---|--|
| Form 9-331 (May 1963) DEPA | ITED STATES RTMENT OF THE INTER GEOLOGICAL SURVEY | SUBMIT IN TI ICA (Other instructions on verse side) | A re- Budget B | roved. ureau No. 42-R1424. ION AND SERIAL NO. | |
| SUNDRY N (Do not use this form for Use "AF | | TTEE OR TRIBE NAME | | | |
| OHL CAN GAN UELL OTH | 7. UNIT AGREEMENT NONE | NAME | | | |
| 2. NAME OF OPERATOR TEXACO Inc. | | | 8. FARM OR GEASE | ng Fod."B" NCT | |
| 3. ADDRESS OF OPERATOR | | | 9. WELL NO. | ile (dd. D. NO | |
| P. O. Box 728 - Hobbs, New Mexico 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* | | | 20 | | |
| At surface Well located 990! | from the North Line, and , T-18-S, R-30-E, Eddy (| d 1651' from the We: | SURVEY OR A | OR BLK. AND BEA | |
| PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) | | 12. COUNTY OB PAR | -18-S, 7-30-E | | |
| Regular | 35561 (GR) | _ | Eddy | N.M. | |
| . Chec | k Appropriate Box To Indicate I | Nature of Notice, Report, c | or Other Data | | |
| NOTICE OF | SEQUENT REPORT OF: | - | | | |
| TEST WATER SHUT-OFF | PULL OR ALTER CASING | WATER SHUT-OFF | X REPAIRIN | O WELL | |
| FRACTURE TREAT | MULTIPLE COMPLETE | FRACTURE TREATMENT | ALTERING | CASING | |
| SHOOT OR ACIDIZE | ABANDON* | 8HOOTING OR ACIDIZING (Other) | ABANDON | MENT* | |
| (Other) (NorE: Report result | | | ults of multiple completion | s of multiple completion on Well eletion Report and Log form.) | |
| Ran 451' of 1 at 462' with Plug at 433'. Tested 10 3/1 to 3:30 A. M. for 30 minute | Spudded 13 3/4" Hole at 10 3/4" O. D. Casing, 21 450 Sx. Lite Water, and Cement Circulated. 3 4" O. D. Casing for 30 m May 16, 1965. Tested s with 800 P. S. I. fro Job complete 4:30 A. M | I.63 LB, Spiral Weld I 150 Sx. Class "C" Job complete 4:00 A. ninutes with 800 P. O. K. Drilled ceme om 4:00 A. M. to 4:3 | h, NEW, and cema neat with 2% CA M. May 15, 196 S. I. from 3:00 ent plug and re- | ACL. 55. D A. M. -tested | |
| | REI | CEIVED | | | |
| | | 44 1 9 1965 | BECEN | /ED | |
| | | O. C. C. TEBIA, OFFICE | RECEN MAY 1 8 U. S. GEOLOGI MRTESIA, NI | 965 CAL SURVEY W MEXICO | |
| . I hereby certify that the forego SIGNED | VIII TITLE ASS | sistant District | | y 17, 1965 | |
| (This space for Federal or Stat | e 'fflice use) | | | | |
| APPROVED BY CONDITIONS OF APPROVAL, | TITLE | | DATE | | |
| CONDITIONS OF PEPR | | | | oo) au Iaro au Jaro au Jaroef au Jaroef | |
| REDUCTION | BAIER, /JR. | s on Reverse Side | | | |