

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

NM OIL CONS. COMMISSION

Drawer DD

Artesia, NM

Form Approved.  
Budget Bureau No. 42-R1424

C/S

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐

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: 2130' FSL & 990' FEL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) COMMENCE DRILLING OPERATIONS	<input type="checkbox"/>	<input type="checkbox"/>

RECEIVED BY

DEC 13 1983

O. C. D.

ARTESIA, OFFICE

NO. 13 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.)\*

SPUD 17 1/2" HOLE, 12:30 PM, 12-2-83  
TOTAL DEPTH 421"

1. RAN 400' (10 JTS) 13 3/8" OD 48# H-40 CASING AND SET @ 421'.
2. CEMENTED W/100 SX LW CEMENT CONTAINING THICK-SET, 10# GILSONITE, 1/4" FLOCELE AND 2% CACL PER SACK. FOLLOW W/150 SX CLASS H CEMENT CONTAINING 10# GILSONITE AND 1/4# FLOCELE PER SACK. FOLLOW W/550 SX CLASS H CEMENT CONTAINING 5# GILSONITE, 1/4# FLOCELE AND 2% CACL PER SACK. CEMENT CIRCULATED. JOB COMPLETE 10:45 PM, 12-2-83. WOC IN EXCESS OF 18 HRS.
3. TESTED 13 3/8" CSG TO 600# FOR 30 MINUTES, 12:15 - 12:45 AM, 12-5-83. TESTED OK. JOB COMPLETE 12-45 AM. 12-5-83.

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

SIGNED [Signature] TITLE Asst Dist Mgr DATE 12-5-83

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY PETER W. CHESTER TITLE DATE

CONDITIONS OF APPROVAL IF ANY  
DEC 12 1983