

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICA
(Other instructions on re-
verse side)Form approved,
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM - 036379

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

Cotton Draw Unit

9. WELL NO.

67

10. FIELD AND POOL, OR WILDCAT

Undesignated

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

Sec. 35, T-24-S, R-31-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

TRXICO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surfaceWell is located 1980' from the South Line and 660' from the
West line of Section 35, T-24-S, R-31-E, (Unit Letter L),
Lea County, New Mexico.

14. PERMIT NO.

Regular

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

3482' (Ground)

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 perti-
nent to this work.)*

TOTAL DEPTH 725':

SPUDDED 17 1/2" HOLE 6:30 A.M., MARCH 21, 1969

Ran 699' (23 Joints) of 13 3/8" O. D. 48# H-40 Casing and cemented @ 725' W/800 Sx.
TLW and 150 Sx. Class "C" Cement. Plug @ 690'. Cement Circulated.
Job Complete 11:30 P.M., March 23, 1969.Tested 13 3/8" O. D. Casing W/600# for 30 minutes from 11:00 A. M. to 11:30 A. M.,
March 25, 1969. Tested O. K. Drilled out cement and retested Casing W/600# for
30 minutes from 2:50 P. M. to 3:20 P. M., March 25, 1969. Tested O. K.
Job Complete 3:20 P.M., March 25, 1969.

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

Assistant District

SIGNED

TITLE Superintendent

DATE March 26, 1969

(This space for Federal or State office use)

APPROVED

CONFIRMATION OF APPROVAL, IF ANY

TITLE

DATE

MAR 23 1969

R. L. BEEKMA

*See Instructions on Reverse Side