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NM OIL CONS. COMMISSION Drawer 55

Artesia, NM 89210

rm Approved Budget Bureau No. 42-F1421

ABANDON\*

(other) Drilling

UNITED STATES DEPARTMENT OF THE INTERIOR

5.	LEASE	NM-41646	
6.	IF INDIAN	, ALLOTTEE OR	TRIBE NAME
7	LINIT AGE	FEMENT NAME	

1 5 4 6 5

RTESIA, OFFICE GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–0 for such proposals.)	8. FARM OR LEASE NAME
1 00	B.D. Federal
$rac{1. ext{ CP}}{ ext{wed}} = rac{ ext{ gas}}{ ext{X}}$ well $=$ other	9. WELL NO.
2. NAME OF OPERATOR	1
TEXACO PRODUCING INC.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Brushy Draw Delaware.
P.O. BOX 728, HOBBS, N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec. 26, T-26S, R-29E
below.) AT SURFACE: 990' FNL & 880'FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Eddy N.M.
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	-[
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD
	2916' GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	
FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL  FRACTURE TREAT  1985	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	
CHANGE ZONES	;

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 3020'

12 Jts., 13 3/8" - 54.5#, K-55, ST&C Set at 500'

- Ran 72 jts. 8 5/8", 32#, J-55, L%&C set at 3020'. FC at 2938'. 1.
- Cemented 8 5/8" csg. w/1800 sx class "H" LW w/15# per sk. salt 2, and 1/4# per sk. Cello-o-seal and tailed w/250 sx class "H" 2% CACL & 1/4# per sk Cell-o-seal. Circ. 325 sx to surface. Job
- complete. WOC in excess of 18 hours.
  Tested 8 5/8" csg. to 1000# for 30 min. 2:00-2:30 AM, 8/22/85. 3. Tested OK. Job complete at 2:30 AM

Geosurface Safety Valve: Manu, and Type	Set @Ft.
18. hereby certify that the foregoing is true and correct	Opr. Mgrate8/23/85
ACCEPTED FOR RECORD  TOTAL  TOTAL  ACCEPTED FOR RECORD  TOTAL  TO	tte affice use.
SEP 3 1985	