

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPL  
(Other instructions  
verse side)E\*  
re-Form approved.  
Budget Bureau No. 42-B1424.

Copy to SF

5. LEASE DESIGNATION AND SERIAL NO.

N M 8811

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal (USA) 'E'

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC. T. R. M. OR B.L. AND  
SURVEY OR AREA

Section 10, T-18-S, R-8-E

12. COUNTY OR PARISH 13. STATE

Otero

New Mexico

## 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 "APPLICATION FOR PERMIT—" 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 and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
Well is located 660' from the South line and 660' from the  
West line of Section 10, T-18-S, R-8-E, Unit Letter M,  
Otero County, New Mexico.
14. PERMIT NO.  
Regular
15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3998.6 (GR)

RECEIVED  
JAN 19 1970  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

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

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(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 pertinent to this work.)\*

Total Depth 1700'  
13-3/8" OD 48# casing set @218'

Ran 1495' of 9-5/8" OD 32.30# H-40 casing and set @1507', unable to work casing deeper. Plug @1450'. Cement w/640 sx Class 'C' w/2% CaCl and 5# sand/sk. Pressure increased to 2000# after 100 sx behind casing. Shut down with casing full of cement. Drilled cement inside of 9-5/8" casing to 1450'. Top of cement by temp bomb @1100', after 24 hrs. Pump in between 9-5/8" and 13-3/8" casing w/30 sx cement w/2% CaCl and 5# sand/sk, 50 sx of 50-50 mixture of calseal and cement and 260 sx Class 'C' w/4% CaCl & 10# gilsonite/sk. Cleared bradenhead and shut in. Job complete at 6:00 PM January 2, 1970. WOC 6 hours. Opened bradenhead, water flow shut off. Cement by temp bomb from 500' plus to 50'. Cement to surface behind 9-5/8" w/10 sx cement.

Tested 9-5/8" OD casing w/1000# for 30 minutes from 10:30 PM to 11:00 PM January 5, 1970. Tested OK. Drilled cement 1450' to 1507' and re-tested w/1000# for 30 minutes from 12:30 AM to 1:00 AM January 6, 1970. Job complete at 1:00 AM January 6, 1970.

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

SIGNED

Assistant District  
Superintendent

DATE January 15, 1970

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

RECEIVED

ACCEPTED FOR RECORD PURPOSES  
JAN 19 1970  
Date

ACTING

District Engineer

\*See Instructions on Reverse Side

JAN 20 1970

O. C. C.  
ARTESIA, OFFICE