Form 9-331 (May 1963)	UN ED STATES SUBMIT IN TRIP TE OEPARTMENT OF THE INTERIOR Verse side)		re- Budget B	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND BERIAL NO. LC-068747 6. IF INDIAN, ALLOTTEE OR TRIBE NAME NONE 7. UNIT AGREEMENT NAME		
		OGICAL SURVEY				
(Do not u	SUNDRY, NOTICES A use this form for proposals to 1 di Use "APPLICATION FO					
1.	Use "APPLICATION FO					
UIL GAS WELL OTHER Water Injection				Northeast C	Northeast Caprock Queen Unit	
2. NAME OF OPERATOR				8. FARM OR LEASE	8. FARM OF LEASE NAME Northeast Caprock	
TEXACO Inc.				Oucen Unit	Oucen Unit	
3. ADDRESS OF OPERATOR				9. WELL NO.	21	
P. O. Box 728 - Hobbs, New Mexico 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface					10. FIELD AND POOL, OR WILDCAT Caprock Queen	
				Caprock Que		
	ated 660' from the N Section 22, T-12-S,	11. SEC., T., R., M., SURVEY OR A	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA			
					12-S, R-32-E	
14. PERMIT NO.		VATIONS (Show whether D (D, E))	F, RT, GR, etc.)	12. COUNTY OR PAI	N.H.	
Regular	r 435	59' (D.F.)	······································	Lea	1 14 . 11 .	
16.	Check Appropriat	e Box To Indicate I	Nature of Notice, Report, o	r Other Data		
	NOTICE OF INTENTION TO:		SUBS	SEQUENT REPORT OF:		
TEST WATER	SHUT-OFT PULL OR A	LTER CASING	WATER SHUT-OFF	REPAIRI	NG WELL	
FRACTURE TR		COMPLETE	FRACTURE TREATMENT	·	G CASING	
SHOOT OR AC			SHOOTING OR ACIDIZING	ABANDO	MENT.	
(Other) Ch	ange to Water Inject		(Other) (Note: Report res Completion or Reco	ults of multiple complet ompletion Report and Log	ion on Well	
17 DESCRIPT PROP	POSED OR COMPLETED OPERATIONS (ork. If well is directionally drill	Clearly state all pertine	ut details, and give pertinent da	tes, including estimated	date of starting any	
We propo	se to do the followi	ing work on sul	oject well:			
L. Pull	rods and tubing.					
2. Run	2-3/8" plastic coate	ad tubing, and	set at 2988'.			
3. Wate	r injection well com	npletion, July	y 26, 1965.	ter f		
				-		
		·				
					• •	
18. I hereby certi	ify that the foregoing is true and	i correct A	ssistant District		······	
signed	Van Hiller Dan G:		uperintendent	LIATE OC	ctober 7, 1965	
(This space f	or Federal or State office use)					
APPROVED 1		TITLE				
CONDITIONS	3 OF APPROVAL, IF ANY:			00T 8 19	185 - M	
		*Sea Instruction	as on Reverse Side	1 .		
		APPA THREE MILLAN		J. L. GORDA	on Ngineer	

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