

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 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: 1815' FSL & 1815' FWL

AT TOP PROD. INTERVAL: (Unit Letter "K")

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) **Shut-in** ☒

SUBSEQUENT REPORT OF:

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5. LEASE

M-0497735

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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7. UNIT AGREEMENT NAME

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8. FARM OR LEASE NAME

M. A. Cunningham Federal

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Todd Wolfcamp

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

Section 26, T-7-S, R-35-E

12. COUNTY OR PARISH

Roosevelt

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

4183' (Gk)

(NOTE: 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.)*

REMARKS

1. Well Status - **Shut-in.**

2. Temporary Abandonment Date - **5/15/80**

3. Reason for Abandonment - **Pumping 100% water.**

4. Future Plans - **Held for salt water disposal.**

5. Date of Future Workover or Plugging - **2nd Quarter of 1982.**

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED B. A. Schaffer TITLE Asst. Dist. Mgr. DATE 6/5/81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

This approval of temporary abandonment expires JUN 11 1982

*See Instructions on Reverse Side

APPROVED

DATE

JUN 11 1981

JAMES A. GILLHAM
DISTRICT SUPERVISOR