

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

JAN 24 10 30 AM '89

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-0338-A
2. NAME OF OPERATOR Texaco Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR PO Box 728, Hobbs, New Mexico 88240	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit Letter A, 660' FNL and 990' FEL	8. FARM OR LEASE NAME E.L. Peery Fed Com
14. PERMIT NO.	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3999' DF	10. FIELD AND POOL, OR WILDCAT LittleLucky Lake Morrow
	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec 29, 15S, 30E
	12. COUNTY OR PARISH Chaves
	13. STATE NM

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 COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input 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.) *

1. Notify BLM 24 hrs. prior to beginning plugging operations.
2. MIRU. Pull tubing and packer.
3. GIH w/CIBP, set at 9800'. Cap w/35' of cement.
4. Circulate hole w/10 ppg brine w/25 pounds of gel per barrel.
5. Spot 35 sacks cement plug 7900-8050'.
6. Spot 35 sacks cement plug 5700-5805'.
7. Spot 75 sacks cement plug 4700-5050'. Tag.
8. Spot 25 sacks cement plug 3000-3100'.
9. Spot 25 sacks cement plug 1320-1420'.
10. Spot 25 sacks cement plug 665-765'.
11. Perforate 2 squeeze holes @ 504'. Attempt to bring cement to surface behind 8 5/8" csg.
12. Spot 25 sacks cement plug 404-504'. Tag.
13. Spot 10 sacks cement plug at Surface.
14. Cut off wellhead. Install dry hole marker.

Verbal Approval on this received from Peter Chester 1-18-89.

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

SIGNED J. A. Head
(This space for Federal or State office use)

TITLE Area Superintendent

DATE 1-19-89

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED
PETER W. CHESTER

FEB 1 1989

*See Instructions on Reverse Side