

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYCOPY TO
SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.
LEASE DESIGNATION AND SERIAL NO.

NM-080258

SUNDRY NOTICES AND REPORTS

(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.)

RECEIVED

| | | | |
|---|--|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> Water Injection | | DEC 8 1978 | |
| 2. NAME OF OPERATOR TEXACO Inc. | | U. S. GEOLOGICAL SURVEY HOBBS, NEW MEXICO | |
| 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 330' FSL & 660' FEL of Section 15, T-17-S, R-32-E, Lea County, New Mexico | | | |
| 14. PERMIT NO. Regular | | 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4033' (DF) | |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | | 7. UNIT AGREEMENT NAME | |
| 8. FARM OR LEASE NAME Federal USA "C" | | 9. WELL NO. 1 | |
| 10. FIELD AND POOL, OR WILDCAT Maljamar Grayburg San Andres | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 15, T-17-S, R-32-E | |
| 12. COUNTY OR PARISH Lea | | 13. STATE New Mexico | |

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Extension Request

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

REMARKS

1. Well Status - Shut-in injector
2. Temporary Abandonment Date - December, 1977
3. Reason for Abandonment - Water injection was abandoned
4. Future Plans - Plug and abandon
5. Date of Future Workover or Plugging - 4th Quarter, 1979

2nd
This approval of temporary
abandonment expires 12-31-79

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

SIGNED _____ TITLE Asst. Dist. Superintendent DATE 12-7-78

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE

ACCEPTED FOR RECORD
DEC 2 1978
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side