

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Form approved.  
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Salt Water Disposal	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Texaco Inc.	8. FARM OR LEASE NAME B. V. Lynch "A" Federal
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240	9. WELL NO. 8
1. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1651' FSL & 660' FEL	10. FIELD AND POOL, OR WILDCAT Lynch Yates Seven Rivers
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34, T-20 S. R-34-E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3760' DF	12. COUNTY OR PARISH Lea
	13. STATE New Mexico

10. 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) Test casing to 500 PSI

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

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.)\*

1. Tie onto 5-1/2" casing with pump truck.
2. Pressure up on casing to 500 PSI for 15 minutes.

Texaco desires to maintain the subject well under TA Status for emergency and standby Salt Water Disposal purposes.

RECEIVED

JUN 06 1986

HOBBS, NEW MEXICO

W. B. Cade

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

W. B. Cade

SIGNED

TITLE Dist. Oper. Mgr.

DATE 6-04-86

(This space for Federal or State office use)

Orig. Spd. Chas. B. Cade

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

6-23-86

\*See Instructions on Reverse Side