(May 1963)	INITED STATES	SUBMIT IN TRIPLICATE	P- Duuget Duitau Ito, 10 Million
DEPARTME OF THE INTERIOR verse side)			D. LEASE DESIGNATION AND STRIAD NO.
GEOLOGICAL SURVEY			LC-029519 (a) 6. IF INDIAN, ALLOTTEE OF TRIBE NAME
SUNDRY NOTIC	CES AND REPORTS O	N WELL'⊈ 0. <b>C. C.</b>	
(Do not use this form for proposals to drill or to deepen or plan back to a different reservoir. Use "APPLICATION FOR PERMIT_" for successformers.)			- NOTE
			NONE
WELL WELL OTHER			8. FARM OR LEASE NAME
TEXACO Inc.			B. V. Lynch "a"
3. ADDRESS OF OPERATOR			9. WELL NO.
P. O. Box 728 - Hobbs, New Mexico 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			3 10. FIELD AND POOL, OR WILDCAT
See also space 17 below.)			Lynch
At surface Well located 660' from the North Line, and 1980' from the East			11 AND TO B M OR PLE AND
Line of Section 34, T-20-S, R-34-E, Lea County, New Mexico.			Sec. 34, T-20-S, R-34-E
PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OF. PARISH 13. STATE	
Regular	3721 (GR)		Lea N. M.
		ature of Natice Report or	Other Data
18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF			
NOTICE OF INTENT	[]	Г	BEFAIRING WELL
1651 WAIDE BROTOD	ULL OR ALTER CASING	WATER SHUT-OFF FRACTURE TREATMENT	ALTERING CASING
FRACTORE INCL	ULTIPLE COMPLETE	SHOOTING OR ACIDIZING	ABANDONMENT*
	HANGE PLANE	(Other)	Its of multiple completion on Well
(Other)		i Completion or Recon	npletion Report and Log form.) es, including estimated date of starting any tical depths for all markers and sones perti-
<ul><li>We propose to do the foll</li><li>1. Pull the pump equipment per foot from 3672'</li></ul>	ent, and perforate 4		wo jet shots per
2. Acidize perforations	with 500 gallons 15	% NE acid. Test we	ll for three days.
3. If well is not top al 3633', 3650', 3656',	llowable, perforate 3663', 3684', 3690'	4 1/2" Casing with , 3698', 3700', 370	two jet shcts at - 2', and 37C4'.
4. Acidize perforations sealers between stage	ges with 16 ball		
5. Swab well, recover lo			
<i>[</i> ;			
18. I hereby certify that the foregoing is SIGNED	s true and correct	ssistant District	D December 1, 1966
(This space for Federal or State office APPROVED BY	ce use) S	A 1966	
CONDITIONS OF APPROVAL, IF A		UEC 2 DOWN	
	*See Instruction	s on Revense Side	