## UNITED STATES SUBMIT IN TRIPLICATES DEPARTMENT O HE INTERIOR (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.
LEASE DESIGNATION AND SERIAL NO.

GEOLOGICAL SURVEY	LC-034075
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.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL SOURCE OTHER  OIL SOURCE OTHER  2. NAME OF OPERATOR	. UNIT AGREEMENT NAME  - 8. FARM OR LEASE NAME
TEXACO Inc.  3. ADDRESS OF OPERATOR	C.J. Saunders Fed 9. WELL NO.
P.O. Box 728 Hobbs, New Mexico 88240 SURV.  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.) 660' FSL & 1980' FWL of Section 18, T-19-S, R-37-E, Unit Letter "N", Lea County, New Mexico.	TO THE SURVEY OR AREA  10. FIELD AND POOL, OR WILDCAT  Funice-Monument  Grayburg San Andres  11. SEC., T., R., M., OR BLK. AND  SURVEY OR AREA
	Sec 18, T-19-S, R-37-E
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
Regular 3693'(DF)	Lea   NM
Check Appropriate Box To Indicate Nature of Notice, Report, or C	Other Data
NOTICE OF INTENTION TO:	JENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT  MULTIPLE COMPLETE  FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE X ABANDON* SHOOTING OR ACIDIZING CHANGE PLANS (Other)	ABANDONMENT*
(NOTE: Report results	of multiple completion on Well letion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, proposed work. If well is directionally drilled, give subsurface locations and measured and true vertice nent to this work.) *	
<ol> <li>Rig up. Install BOP. Pull rods and tubing.</li> <li>Clean out to 3973' (TD).</li> <li>Acidize open-hole section 3762'-3973' w/2500 g gal diverting agent (SAF Mark II) in 4 equal s Salt between stages.</li> <li>Flush w/2% KCL water.</li> </ol>	al 15% NCL & 1000 tages using 350#
5. Install pumping equipment, test and return to	production.
18. I hereby certify that the foregoing is true and correct  SIGNED	DATE 10-28-76
(This space for Federal or State office use)	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	ACCEPTED FOR RECORD

\*See Instructions on Reverse Side

HOBBS, NEW MEXICO

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