

NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

MISCELLANEOUS NOTICES

Submit this notice in TRIPLICATE to the District Office, Oil Conservation Commission, before the work specified is to begin. A copy will be returned to the sender on which will be given the approval, with any modifications considered advisable, or the rejection by the Commission or agent, of the plan submitted. The plan as approved should be followed, and work should not begin until approval is obtained. See additional instructions in the Rules and Regulations of the Commission.

Indicate Nature of Notice by Checking Below

NOTICE OF INTENTION TO CHANGE PLANS		NOTICE OF INTENTION TO TEMPORARILY ABANDON WELL		NOTICE OF INTENTION TO DRILL DEEPER	
NOTICE OF INTENTION TO PLUG WELL		NOTICE OF INTENTION TO PLUG BACK		NOTICE OF INTENTION TO SET LINER	
NOTICE OF INTENTION TO SQUEEZE	X	NOTICE OF INTENTION TO ACIDIZE		NOTICE OF INTENTION TO SHOOT (Nitro)	
NOTICE OF INTENTION TO GUN PERFORATE	X	NOTICE OF INTENTION (OTHER)		NOTICE OF INTENTION (OTHER)	

OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICOTEXACO Inc., P. O. Box 728,
Hobbs, New Mexico

March 14, 1962

(Place)

(Date)

Gentlemen:

Following is a Notice of Intention to do certain work as described below at the.....

TEXACO Inc. J. K. Rector

(Company or Operator)

Well No. 4 in 0 (Unit)

SW 1/4 SE 1/4 of Sec. 30, T. 21-S, R. 36-E, NMPM, Eumont (Gas) Pool

Lea County.

FULL DETAILS OF PROPOSED PLAN OF WORK

(FOLLOW INSTRUCTIONS IN THE RULES AND REGULATIONS)

We propose to do the following work on subject well:

1. Kill well with water and run radioactive tracer survey. (Survey required to determine if water is from producing interval or communicating from another zone behind casing).
2. Set cement retainer at 3435' and squeeze with 250 sacks of cement.
3. Drill out cement and re-perforate. (Interval to be determined from tracer survey).
4. Acidize perfs with 1000 gallons LSTNE acid.
5. Swab, test and return to production.

Approved....., 19.....
Except as follows:Approved
OIL CONSERVATION COMMISSION

By.....

Title.....

TEXACO Inc.

Company or Operator

By.....

Position Assistant District Superintendent

Send Communications regarding well to:

Name H. N. Wade

Address P. O. Box 728, Hobbs, New Mexico