COPY TO O. C. C

Form Approved. Budget Bureau No. 42-R1424

UNITED S ES	5. LEASE LC-033706 (b)
DEPARTMENT OF THE INTERIOR	
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME C. P. Falby 'B' Federal
1. oil gas other	9. WELL NO.
2. NAME OF OPERATOR TEXACO Inc.	1 10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Drinkard
P. O. Box 728, Hobbs, New Mex.88240 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
holow?	Sec. 8, T-22-S, R-37-E
AT SURFACE: 1980' FSL & 1980' FWL AT TOP PROD. INTERVAL:(Unit Letter 'K')	12. COUNTY OR PARISH 13. STATE Lea New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3422' (DF)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9–330.)
MULTIPLE COMPLETE	
CHANGE ZONES	
To Abandon Fumont (Shut-In Zone of	h mutul-ud Domés
Penrose Skelly Unit. Gulf. Opr.) & Add'	1 Drinkard Peris.
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertine	nt to this work.)*
Rig up. Install BOP. Pull Tbg & Pkr. Test Csg. Set RBP @ 6400' & spot 25' S	
Set cement retainer @ 3421'. Squeeze E	umont perfs. 3471' - 3489'
W/200 Sx. Class 'H' Cement containin	ig 2% Cacl. Doc. lest.
Clean out to 6542' (PBTD). Perforate 4 1/2" Csg w/2-JSPF @ 6327', 92',6410',17',21',24',28',49',52',61	46',50',59',61',63',75',82'
Set Pkr. @ 6270'. Acidize Drinkard per	fs. 6327'-6538' w/3000 gals
20% NEFE LST Acid in 6-equal stages	using rock salt & Benzoic Ac
Flakes (to be determined) between st	ages. Swab & evaluate.
NT'D ON ATTACHMENT	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	7+ 77 78 80
	Supt. DATE LI-LO-OU
SIGNED TITLE Asst. Dist. S (This space for Federal or State o	- DATE

*See Instructions on Reverse Side

1104 2 1981)

LOW E. Sale

FORTRICT SUPERVISOR