| Unit letter E,   | 1980 feet from the North line and 660 feet from Section 8, Township 22S, Range 37E.   | Drinkard  11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA |
|--|---|--|
| P. O. Box 728 4. Location of Well (Rep See also space 17 below. At surface | ort location clearly and in accordance with any State requirements.*  | 10. FIELD AND POOL, OR WILDCAT                             |
| TEXACO Inc.  |   | C. P. Falby "A" Fed.                                       |
| OTL X GAS WELL X WELL 2. NAME OF OPERATOR                                  | 0.1353  | 7. UNIT AGREEMENT NAMS  8. FARM OR LEASE NAMS              |
| SUND<br>(Do not use this for   | RY NOTICES AND REPORTS ON WELLS  on for proposals to drill or to deepen or plug back to a different reservoir.  se "APPLICATION FOR PERMIT—" for such proposals.) | 6. IF INDIAN, ALLOTTEE OF TEIRS NAME                       |
| Form 9-331<br>Mag 1992)  | UNI D STATES SUBMIT IN TRIPL TE- DEPARTMEN (OF THE INTERIOR Verse side) GEOLOGICAL SURVEY   | 5. LEASE DESIGNATION AND SERIAL NO.  LC-033706 (a)         |
|  | · · · · · · · · · · · · · · · · · · ·   | i ·  |

| NOTICE OF INTENTION TO:   | SUBSEQUENT REPORT OF :-   |  |
|---|---|--|
| TEST WATER SHUT-OFF  FRACTURE TREAT  SHOOT OR ACIDIZB  REPAIR WELL  (Other)  MULTIPLE COMPLETE  ABANDON*  CHANGE PLANS  X | WATER SHUT-OFF  FRACTURE TREATMENT  SHOOTING OR ACIDIZING  (Other)  (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.)\*

## REMARKS

- WELL STATUS Abandoned Salvage Deferred 1.
- TEMPORARY ABANDONMENT DATE January, 1966 2.
- REASON FOR ABANDONMENT Not profitable to operate.
- FUTURE PLANS The Penrose Skelly Zone is in Gulf's South Penrose Skelly Unit. The Drinkard Zone will be abandoned when the Unit is terminated.

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

OCT 22 1974 (\*\*) DATE . TITLE SIGNED (This space for Federal or State office use) APPROVED BY \*See Instructions on Revelle SideBS, NEW MEXICO CONDITIONS OF APPROVAL, IF ANY: