

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate  
(Check one)  
ORIGINAL  
COPY  
REPRODUCTION

Expires August 31, 1985

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Texaco Inc.	8. FARM OR LEASE NAME C H LOCKHART
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, NM 88240	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit Letter D, 660 feet from West line, 660' from North line	10. FIELD AND POOL OR WILDCAT Blindery Oil & Gas & Tubb Oil & Gas
14. PERMIT NO. 30-025-12125	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 18-22S-38E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3354' DF	12. COUNTY OR PARISH Lea
	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(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.) \*

- 1) R.U. POH w/prod. equipment.
- 2) Perf w/2 SPI at following intervals: 5674, 79, 98, 5703, 08, 31, 35, 37, 39, 65, 71, 73, 80, 82, 86, 88, 92, 93, 97, 5803, 13, 17, 21, 25, 28, 42, 45, 49, 51, 55, 58, 67, 72, 5920, 23, 26, 27, 29, 33, 37, 40, 49, 59, 61 and 5963. (45 int, 90 holes)
- 3) TIH w/7" RBP & PKR test to 8000#.
- 4) Set RBP @ 5998. Set pkr @ 5502.
- 5) Acidize perms w/10,000 gals. 15% NEFE
- 6) Frac perms w/10,000 gals. gelled 40# s-link wtr containing 1 ppg to 6 ppg 20/40 sand (252,000#).
- 7) Flush w/67 bbls 2% KCL wtr.
- 8) Release pkr. Release RBP. POH.
- 9) GIH. W/prod. equipment.
- 10) 24 hr potential pmp 63<sup>o</sup>/138<sup>w</sup>/2032<sup>gor</sup> gravity 37.7 @ 60<sup>o</sup>.

ACCEPTED FOR RECORD

FEB 19 1986

18. I hereby certify that the foregoing is true **CARISBAD, NEW MEXICO**

SIGNED [Signature] TITLE Dist. Oper. Mgr. DATE 02/13/86

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

RECEIVED  
FEB 24 1986  
O.C.D.  
HOBBS OFFICE