Form 9-331 (May 1963)	UN ED STA EPARTMENT OF TH GEOLOGICAL	E INTERIOR vers	MIT IN TRIP TH Der instruction, r e side)	e Form appro Budget Bur 5. LEASE DESIGNATION LC-032100	eau No. 42-R1424.	
	RY NOTICES AND R m for proposals to drill or to d se "APPLICATION FOR PERMI			6. IF INDIAN, ALLOTT NONE	EE OR TRIBE NAME	
1. OIL GAS WELL WELL Image: Constraint of the second	OTHER		i	7. UNIT AGREEMENT N NONE 8. FARM OR LEASE NA		
3. ADDRESS OF OPERATOR	TEXACO Inc.	TEXACO Inc.			C.H. Lockhart Federal NCT-1	
	P. O. Box 728 - Hobbs, New Mexico			10		
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface				10. FIELD AND POOL, Drinkard	10. FIELD AND POOL, OB WILDCAT Drinkard	
well located 660' from the East Line, and 1980' from the North Line of Section 18, T-22-S, R-38-E, Lea County, N. M				11. SEC., T., R., M., OR BLK. AND SUBVEY OR ABEA Sec. 18, T-22-S, R-38-E		
14. PERMIT NO.	15. ELEVATIONS (S	Show whether DF, RT, GR, etc.	,	12. COUNTY OR PARIS		
Regular	<u>،</u>	3376' (D. F	-	Lea	N. M.	
	Check Appropriate Box T	o Indicate Nature of	Notice, Report, or	Other Data		
NOTI	CE OF INTENTION TO :		SUBSE	QUENT REPORT OF:	. []	
TEST WATER SHUT-OFF FRACTURE TREAT	PULL OR ALTER CASI MULTIPLE COMPLETE		FER SHUT-OFF	V REPAIRING		
SHOOT OR ACIDIZE	ABANDON*		OTING OR ACIDIZING	ALTERING ABANDONMI		
REPAIR WELL	CHANGE PLANS	(Ot	her)			
(Other)	(Other) (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) DESCRIPTE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and					
	_					
	To Spudded 11" Ho	tal Depth - 135 le at 6:00 A. M) • • • • • • • • • • • • • • • • • • •	64		
	of 7 5/8" 0. D. Cas 500 Sx. Class "C" Plug at 1318". Cer 1964.					
and re-tes	/8" 0. D. Casing fo :00 P. M. August 10 ted for 30 minutes 1964. Tested 0. H	$J_{1} \perp 904$. Tested	0. K. Drill	ed cement plug		
18. I hereby certify that the SIGNEDH. D. (This space for Federal o	Raymond	TITLE Assistan	t District Sup	ot. _{DATE} Septe	mber 3, 1964	
APPROVED BY CONDITIONS OF APPRO	VAL, IF ANY	TITLE				
Southern of artic			SEP 4	1964		
	*\$~	Instructions on Reve				
			ACTING DISTRIC	DON T ENGINEER		