UNITED STAPE

DEPARTMENT OF THE INTERIOR

GECLOGICAL SURVEY

SUNDRY NOTICES A	AND	REPORTS	ON	WELLS
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(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.)

1. oil other well well 2. NAME OF OPERATOR TEXACO INC.

3. ADDRESS OF OPERATOR, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE:

SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) _____Add/_

AT TOTAL DEPTH:

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT

AT TOP PROD. INTERVAL: 660' FNL & 1980' FWL (Unit Letter "C")

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE. REPORT. OR OTHER DATA

SUBSEQUENT REPORT OF:

LC-032104 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME A. H. Blinebry Fed. NCT-3 9. WELL NO. 3 = 4 J 31 <u>.</u> ... 10. FIELD OR WILDCAT NAME Drinkard 11. SEC., T., R., M., OR BLK. AND SURVEY OR **AREA** Sec 31, T-22-S, R-38-E 12. COUNTY OR PARISH 13. STATE 1 = <u>New Mexico</u> Lea 14. API NO.

5. LEASE

15. ELEVATIONS (SHOW DF, KDB, AND WD) 3325' (GR)

(NOTE: Report results of multiple completion or zone

change on Form 9-330.)

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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. RIGGED UP. PULL RODS AND PUMP. PULL TUBING. INSTALL BOP.
- 2. SET PKR @ 7000'. ACIDIZE 7" CSG PERFS 6663-7208' W/1000
- 3. GALS 15% NEFE ACID AND 1000 SCF NITROGEN PER BBL. PKR.
- PERFORATE 7" CSG W/2-JSPF FROM 6270-6283, AND @ 6295,6310, 4. 16, 19, 22, 74, 6405, 12, 19, 22, 31, 41' 45, 50, 56, 60' 6465, 69, 80, & 6497.
- SET PKR @62196'. ACID-FRAC CSG PERFS 6270-6497' W/10,500 5. GALS 28% GEL NE ACID & 16,500 GALS 9# GEL BRINE IN 7-EDUAL
- 6. INSTALL PUMPING EQUIPMENT. ON 24 HR PT ENDING 9-9-84, WELL PUMPED 30 BO, 11 BW. 는 눈 살리 주말롭게

Subsurface Safety Valve: Manu. and Type		Set @	Ft.
18. I hereby certify that the foregoing is true and correct SIGNED	DATE	9-14-84	1 (4) (4) (4) (4) (4) (4) (4) (4
ACCEPTED FOR RECORDIS space for Federal or State office use)		·	
APPROVED BY	_ DATE _		