

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

RECEIVED IN WRITING  
CONTRACT INSTRUCTIONS  
SEE PAGE 1

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FO-

Form approved  
Bureau of Land Management  
No. 42 R1424.  
5. LEASE IDENTIFICATION AND SERIAL NO.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a universal reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

|                                                                                                                                                                                                                                                                                                   |                                                             |                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| 1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER                                                                                                                                                                                  |                                                             | 6. IF INDENT, ALLOCATOR OR TRIBE NAME                                                          |
| 2. NAME OF OPERATOR<br>TEXACO Inc.                                                                                                                                                                                                                                                                |                                                             | 7. FIRST AGREEMENT DATE                                                                        |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 728 Hobbs, New Mexico 7804                                                                                                                                                                                                                                    |                                                             | 8. FARM OR LEASE, ETC.                                                                         |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>Well located 330' from the south line of Sec 34, Township 26 South, Range 37 East<br>line of Section 34, Township 26 South, Range 37 East<br>New Mexico |                                                             | 9. O. Elliptic Federal<br>10. FIELD AND POOL, OR WILDCAT                                       |
| 14. PERMIT NO.<br>Regular                                                                                                                                                                                                                                                                         | 15. ELEVATIONS (SHOW WHETHER BE, KY, OR, ETC.)<br>3111 (57) | 11. BBL, T, CU, M, OR GALL, AND SURVEY OR AREA<br>Section 34, Township 26 South, Range 37 East |
|                                                                                                                                                                                                                                                                                                   |                                                             | 12. COUNTY OR PARISH 13. STATE<br>Lea New Mexico                                               |

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other)

(Other)

(Note: Report results of multiple completion or 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 location and measures and true vertical depths for all markers and zones pertinent to this work.)\*

The following work has been completed on subject well:

1. Cased rods, tapered bottom with casing, of 48" ID 48" OD.
2. Frac perfor 48" ID-48" OD w/60" casing, 1" sand/pal + 1" OD adobe post pal.
3. Ran TBG open ended set 11" ID-11" OD 48" OD.
4. Ran rods and pump recover good oil, and, placed on production.
5. On 24 hour potential test ending 2:00 PM April 6, 1968, well pumped 7 BW and 8 BW, Gravity 39.6, COR 11771.

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

Assistant District

SIGNED

TITLE

Superintendent

DATE April 8, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: