UN ED STATES SUBMIT IN TRIP (Other Instruction Verse Bide)

Form approved. Budget Bureau No. 42-R1424.

TE*	
11-	5. LEASE DESIGNATION AND SERIAL NO.
	LC-030177 - (b)

סבות	IC-030177 - (b)				
SUNDRY N (Do not use this form for t	6. IF INDIAN, ALLOTTER OF TRIBE NAME None				
1.			7. UNIT AGREEMENT N	AMB	
OIL X WELL OTH	None				
2. NAME OF OPERATOR	·	M. MAILM OR DRAND NAME			
TEXACO Inc.	C. W. Shepherd "B" Federal				
3. ADDRESS OF OPERATOR	9. WELL NO.				
P. O. Box 728,	5				
4. LOCATION OF WELL (Report loca	10, FIELD AND POOL,	OR WILDCAT			
See also space 17 below.) At surface	Jalmat				
Well is located 660	o' from the East Line,	and 1980' from the	SURVEY OR ARE	11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA	
South Line of Secti	lon 1, T-26-S, R-36-E,	Lea County, New	Section 1, T-26-S,		
Mexico.	2, 1 25 2, 8 3	•	R-36-E		
14. PERMIT NO.	15. ELEVATIONS (Show whether	DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE		
Regular	3002 D. F.)	Lea	N.M.	
		<u> </u>	- Other Data		
16. Chec	k Appropriate Box To Indicate			· · · · · · · · · · · · · · · · · · ·	
NOTICE OF	INTENTION TO:	SUBE	SEQUENT REPORT OF:	اا	
	PULL OR ALTER CANING	WATER SHUT-OFF	RETAIRING	w mr.t.	
TEST WATER SHUT-OFF	MULTIPLE COMPLETS	FRACTURE TREATMENT	ALTERING	CARING.	
FRACTURE TREAT	ABANDON*	SHOOTING OR ACIDIZING	ABANDONM	BNT*	
SHOOT OR ACIDIZE	CHANGE PLANS	(Other)		an Well	
(Other) Convert to	T-jostjon	Completion or Rect	ults of multiple completion impletion Report and Log i	(91 111.)	
(Other) CONVERT OF COMPLET	ED OPERATIONS (Clearly state all perti-		And the dualing outlineted d	nte of starting any	
proposed work. If well is nent to this work.) *	ED OPERATIONS (Clearly state all pertidirectionally drilled, give subsurface	locations and measured and true ve	ticks deptar and an		
TEXACO PROPOSES					
2. Sauceze perf 3. Pull tubing. 4. Run drill pi	• D. tubing w/ packer orations 2934'-2938' we pe and drill out cemen hole w/ 1000 gals. 15	1/100 sx. Class "H" C at and open hole from % NE Acid.	2964' to 3119'		
6. Run 2900' 2	3/8" od internally pla	stic coated tubing w	packer and sec		
2900'	head equipment and be	agin injection on or	about February		
7. Install well	nead enuipment and be	sem mijocozon on or			
10, 1969.		•			
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			- 10 m		
			64		
18. I hereby certify that the fore	gring is true and correct	Assistant District		•	
(1/2)	Marrie an	Superintendent	DATE Ja	mary 30, 1969	
SIGNED		THE PARTY OF THE P	1		
(This space for Federal or 8	tath office use)	APPE	DATE		
APPROVED BY		JAN 3 0 1969			

*See Instructions on Reverse Side