Form 9-331 (May 1963)	UNITED S DEPARTME OF GEOLOGICA	THE INTERIO	SUBMIT IN TRIPLE (Other instruction verse side)	re- Budge	approved. et Bureau No. 42-R1424. UNATION AND SERIAL NO. 4-B
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.)					MENN BEIST NO BETTOLL
OIL GAS WELL 2. NAME OF OPERATOR	OTHER Convert	to Water Inje	etion .	7. UNIT AGREES NONE 8. FARM OR LE	
	TEXACO I	nc.			odes "b" NCT-1
3. ADDRESS OF OPERATOR		x 728 - Hobbs	, New Mexico	9. WELL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface					POOL, OR WILDCAT
Well located 1980' from the South Line, and 660' from the					M., OR BLE. AND
West Line of Section 26, T-26-S, R-37-E, Lea County, N. M.					DR ARBA T-26-S. R-37-E
14. PERMIT NO.	15. ELEVATION	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		· · · · · · · · · · · · · · · · · · ·	PARISH 18. STATE
Regular	11ar 29981		(D. F.)		N. M.
16.	Check Appropriate Bo	x To Indicate Nat	ure of Notice, Report,	, or Other Data	
N4	OTICE OF INTENTION TO:		8	UBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	PULL OR ALTER MULTIPLE COMP ABANDON* CHANGE PLANS			ALTE	
17. DESCRIBE PROPOSED OR	COMPLETED OPERATIONS (Clearl well is directionally drilled, gi	ly State all pertinent d	Completion or Re	ecompletion Report and	Log form.)
1. Pulled rods 4" flush jo	ork has been completed and tubing, clean int liner over ope of 2 3/8" internall at 300h.	ed out well to n hole section	o a total depth	of 32751. Gr	avel pack
_	tion completion, N	ovember 10, 1	96կ.	To Property of the State of the	
				control (fire	
				1992 1992 1993 1993 1993 1993 1993 1993	State of A
				With the second of the second	경우 (1) 10 10 10 10 10 10 10 10 10 10 10 10 10
8. I hereby certify that th	he foregoing is true and corre	ch ·			
SIGNED H. D.	Kamung Raymong	TITLE Assis	stant District	No	vember 20, 196
(This space for Federal APPROVED BY	l or State office use)		APPRO	VED ME	
CONDITIONS OF APP	ROVAL, IF ANY:	TITLE	NOV 23	1964	Figure 1.
		_	_	3 8 6 4	in the second of