

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate  
(Other instructions on  
reverse side)

Form approved by  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Myers Langlie Mattix Unit
2. NAME OF OPERATOR Texaco Producing Inc.		8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, NM 88240		9. WELL NO. 254
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  2439' FSL & 200' FWL		10. FIELD AND POOL, OR WILDCAT Langlie Mattix Seven Rivers Queen
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 29, T23S, R37E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3313' GR		12. COUNTY OR PARISH Lea
		13. STATE NM

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 COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other) Commence Drilling

(Other)

(NOTE: Report results of multiple completion on 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 locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

TOTAL DEPTH 3750'

Ran 8 5/8", 24#, J-55, ST&C set @ 1066'.

- 1) Ran 92 jts (3740') 5 1/2", 15.5#, J-55, LT&C csg. set @ 3750'.
- 2) Cemented 1st stage w/350 sx 50/50 Poz "H" w/1/4#/sx floseal. Circulated 175 sx to surface. 2nd stage w/800 sx CL "H" LW w/15#/sx salt & 1/4#/sx floseal. Circulated 100 sx to surface WOC 18 hrs.
- 3) Tested csg. w/1000# from 2:30 p.m. to 3:00 p.m. on 04/02/86. Tested ok. Job Complete at 3:00 p.m.

ACCEPTED FOR RECORD

*[Signature]*

APR 18 1986

CAPISBAG, NEW MEXICO

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

SIGNED

TITLE District Admin. Supervisor

DATE 04/09/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

REMOVED  
APR 21 1986  
© 1986  
HOBBS OFFICE