

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐
2. NAME OF OPERATOR
TEXACO, Inc.
3. ADDRESS OF OPERATOR
P.O. Box 728, Hobbs, N.M. 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1650' FSL & 1980' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

| REQUEST FOR APPROVAL TO: | | SUBSEQUENT REPORT OF: | |
|--------------------------|--------------------------|-----------------------|-------------------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | | <input checked="" type="checkbox"/> |
| (other) | <input type="checkbox"/> | | <input type="checkbox"/> |

5. LEASE
91-005247
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
Cotton Draw Unit
8. FARM OR LEASE NAME
Cotton Draw Unit
9. WELL NO. 49
10. FIELD OR WILDCAT NAME
Paduca Delaware
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 3, T-25-S, 32-E
12. COUNTY OR PARISH
LEA
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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. Installed BOP.
2. Dumped 100' cmt. on top CIBP at 4600'.
3. Perfed 4 1/2" csg. at 800' w/4 JS.
4. Circ. 300 sx class "H" neat cmt. through retainer and out bradenhead. Sqzd. 50 sx. through retainer. Flush w/2 BFW.
5. Circ. 80 sx. class "H" cmt. FR 438' to surf.
6. Installed dry hole marker. Cleaned location. Plug and abandoned well.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED W.B. Loh TITLE Dist. Opr. Mgr. DATE April 15, 1985

(This space for Federal or State office use)

APPROVED BY Org. Sec. Chas. L. ... TITLE _____ DATE 4-15-85
CONDITIONS OF APPROVAL IF ANY: