APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

DEPARTMENT OF THE INTERIOR	91-005247
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
·	Cotton Draw Unit ADD 12 105
(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.)	8. FARM OR LEASE NAME
1. oil ex gas	Cotton Draw Unit
well gas other	Q WELL NO
2. NAME OF OPERATOR	49 j
TEXACO, Inc.	10 FIELD OD WILLDON TAKE
	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Paduca Delaware
P.O. Box 728, Hobbs, N.M. 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec 3, T-25-S, 32-E
below.)	
AT SURFACE: 1650' FSI, & 1980' FEL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	LEA NM
	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
DEGUEST FOR ADDROVAL TO	, , , , , , , , , , , , , , , , , , , ,
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF [
FRACTURE TREAT	
SHOOT OR ACIDIZE REPAIR WELL NOTE: Boood coults of an incidence of the coults of an incidence of the coults of the coult of the coults of the coult of the coults of the coult of the coults of the coults of the coult of the coults of the coult	
PULL OR ALTER CASING (NOTE: Report results of multiple completion or zone change on Form 9–330.)	
MULTIPLE COMPLETE	Tons
CHANGE ZONES	(°-13)
ABANDON*	
(other)	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is di measured and true vertical depths for all markers and zones pertinent	all pertinent details, and give pertinent dates, rectionally drilled, give subsurface locations and 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.	
· · · · · · · · · · · · · · · · · · ·	
6. Installed dry hole marker. Cleaned location. Plug and abandoned well.	
à	
Subsurface Safety Valve: Manu. and Type	Sat @ Et
18. I hereby certify that the foregoing is true and correct	
SIGNED W.B. CL TITLE Dist. Opr. Mg	r. DATE April 15, 1985
DATE - DATE	
(This space for Federal or State office use)	

_____ DATE __ __

_ TITLE _