

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other Instructions  
reverse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

LC-061936 A

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME Cotton Draw Unit
2. NAME OF OPERATOR TEXACO Inc.		8. FARM OR LEASE NAME Cotton Draw Unit
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240		9. WELL NO. 34
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit letter P, 330 feet from the South line and 330 feet from the East line.		10. FIELD AND POOL, OR WILDCAT Paduca Delaware
14. PERMIT NO.		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA 9-25S-32E
15. ELEVATIONS (Show whether DF, RT, CR, etc.)		12. COUNTY OR PARISH 13. STATE

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(Other) Extension Request ☒ (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.)\*

REMARKS

1. WELL STATUS - TR-O(To Be Reconditioned-Oil)
2. TEMPORARY ABANDONMENT DATE - May, 1973
3. REASON FOR ABANDONMENT - Water Breakthrough

4. FUTURE PLANS - Convert to water injection well for use in the Cotton Draw Unit Waterflood Project.

5. DATE OF FUTURE WORKOVER OR PLUGGING - 1976

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

SIGNED

TITLE Asst. Dist. Supt.

DATE 10-7-75

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

OCT 10 1975

JIM SIMS  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side