

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.)  
2309' FSL & 2310' FEL  
AT SURFACE:  
AT TOP PROD. INTERVAL: (Unit Letter 'J')  
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 checked="" 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 type="checkbox"/>
(other) REpair Casing Leak		

5. LEASE  
LC-061936

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
E.F. Ray 'B' Federal NCT-1

9. WELL NO.  
6

10. FIELD OR WILDCAT NAME  
Paduca Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 10, T-25-S, R-32-E

12. COUNTY OR PARISH  
Lea

13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3463' (DF)

(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. Install BOP.
2. Cut 7 5/8" Csg @ 7' & replace bad casing from 7' to surface.
3. Set CIBP @ 4540' & dump 40' cement on plug.
4. Ran 1-jt. 2 3/8" tubing W/pkr. & test to 500# for 30 minutes 9:30-10:00 AM, 1-17-85. Tested OK. Job complete 10:00AM, 1-17-85.
5. Pull pkr & run 1 jt. tubing in hole.
6. Remedial work completed shut-in 1-17-85.

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 1-24-85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

FEB -6 1985

O.C.O.  
HOBBS OFFICE