DEPARTMENT OF THE INTERIOR	249 LC-061936
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different	Cotton Draw Unit
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas	Cotton Draw Unit
well XX well other	9. WELL NO.
2. NAME OF OPERATOR TEXACO Inc.	33 10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Paduca Delaware
P. O. Box 728, Hobbs, New Mexico 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA = 7 g 8 g 2 g
below.)	Sec. 10, T-25-S, R-32-E
AT SURFACE: 1980' FNL & 1980' FWL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: (Unit Letter 'F')	Lea New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	इ. १९ - च
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	3462' (DF)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
FRACTURE TREAT	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	
CHANGE ZONES	
ABANDON CONVERT TO WATER INJECTION	
(other) CONVERT TO WHITEK TROBETION	all and and all all all all all all all all all al
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinen	irectionally drilled, give subsurface locations and
Wessured and time Astrical debrils for all markets and zones bermien	
	그 그 그는 그를 받을 통해 있다. 그는 그를 모르는 그 그를 모르는 그를 보다 그 것이 되었다.
Rig up. Pull rods and pump. Install BO	P. Pull tubing.
Clean out.	
Set pkr @ 4650'. Acidize perfs 4712'-47	
Run plastic coated injection tubing W/pk	r and set @ 4650'.
Load Annulus W/inhibited water.	
Convert well to water injection.	
	Set @ Ft.
Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct	
SIGNED W.B. Colon TITLE Dist. Opr. SM	ar 1-23-85
(This space for Federal or State office	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
COMMISSIONS OF AFFROMAL II AND .	

Subject to
Like Approval
by State

5. 6.

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