

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 Water Injection Well

2. NAME OF OPERATOR
TEXACO Inc.

3. ADDRESS OF OPERATOR
P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FNL & 660' FWL
AT TOP PROD. INTERVAL: (Unit Letter 'E')
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

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To: Squeeze upper perfs & treat lower perfs

U.S. GEOLOGICAL SURVEY
HOBBS, N.M.

JUN 15 1981

(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. Rig up.. Install BOP. Pull tubing & packer.
2. Set RBP @ 4660' & pkr. @ 4600'. Test Csg. Pull pkr. Spot 10' Sand on plug.
3. Set cement retainer @ 4520'. Squeeze 4 1/2" Csg perforations 4630' - 4634' w/150 Sx. Class 'H' cement. WOC. DOC & retainer. Test. Pull RBP.
4. Set pkr. @ 4650'. Acidize perfs. 4671'-4720' w/1000 gals. 15% NEFE Acid in 2-equal stages using 800# rock salt between stages. Flush. Pull pkr.
5. Run 2 3/8" plastic coated tubing @ set pkr. @ 4520'. Test & return to injection.

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

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

SIGNED [Signature] TITLE Asst. Dist. Mgr DATE 6-9-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

APPROVED
JUN 22 1981
JAMES A. GILLHAM
DISTRICT SUPERVISOR