

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

M. OIL CONS. COMMISSION
O. BOX 1980
HOBBS, NEW MEXICO 88240

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.)
AT SURFACE: 660' FNL & 660' FWL
AT TOP PROD. INTERVAL: (Unit Letter 'D')
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 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) Perf & Treat Addl. Pay
in Delaware

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. Pull rods & pump. Install BOP. Pull tubing.
2. Clean out to 4740'.
3. Perforate 4 1/2" Csg. w/2-JSPF from 4676' - 4680'.
4. Set pkr. @ 4620'. Acidize perfs. 4676' - 4723' w/1000 gals. 15% NEFE Acid in 2-equal stages using 300# rock salt between stages. Flush w/45 Bbls. Treated Water.
5. Frac perfs. 4676' - 4723' w/5000 gals. gelled water, 4500# 10/20 sand & 6000# 8/12 sand. Flush w/28 Bbls. Water. Clean Out.

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

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

SIGNED _____ TITLE Asst. Dist. Mgr DATE 7-6-82

APPROVED

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

JUL 13 1982
FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side

5. LEASE
LC-062300
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
-
7. UNIT AGREEMENT NAME
Cotton Draw Unit
8. FARM OR LEASE NAME
Cotton Draw Unit
9. WELL NO.
20
10. FIELD OR WILDCAT NAME
Paduca Delaware
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 15, 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)
3452' (DF)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

DECEMBER
JUL 8 1982

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

RECEIVED

JUL 15 1982

Q.C.D.
HOBBS OFFICE