

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN PLICATE\*  
(Other instr. as or re-  
verse side)

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

LC-061869

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		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. 27
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Well located 2310' from the South Line and 990' from the East Line of Section 21, T-25-S, R-32-E, Unit Letter I, Lea County, New Mexico.		10. FIELD AND POOL, OR WILDCAT Paduca Delaware
14. PERMIT NO. Regular		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21, T-25-S, R-32-E
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3409' (DF)		12. COUNTY OR PARISH Lea
		13. STATE New Mexico

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 checked="" 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"/>		(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 and 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.)\*

THE FOLLOWING WORK HAS BEEN COMPLETED ON SUBJECT WELL

1. Pull rods and tubing.
2. Run 2-7/8" tubing w/packer and set at 4535'.
3. Frac w/15,000 gals gelled lease crude w/1# 20/40 sand per gal, 25#/1000 gal Mark II Adomite and 40#/1000 gal gelling agent in 3 equal stages. Follow each stage w/25# unbeads.
4. Pull 2-7/8" tubing w/packer and run 2-3/8" tubing.
5. Swab, run rods and return to production.

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

SIGNED

*J. Schreff*

Assistant District

TITLE Superintendent

DATE April 14, 1970

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

APR 15 1970

\*See Instructions on Reverse Side  
GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

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RECEIVED

APR 21 1970

ON CONGRESSIONAL RECORD