

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPL
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.

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. WELL TYPE: OIL WELL GAS WELL OTHER Water Injection

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 and in accordance with any State requirements.
See also space 17 below.)
At surface:
Well is located 660' from the South Line ~~XXXXXXXXXXXX~~
~~XXXXXXXXXX~~ and 660' from the West Line of Section 21, T-25-S,
R-32-E, Unit Letter M.

5. WELL NO.: Regular 3397' DF

3. LEASE DESIGNATION AND SERIAL NO.: LC-061869

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.: 37

10. FIELD AND POOL, OR WILDCAT: Paduca Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 21, T-25-S, R-32-E

12. COUNTY OR PARISH: Lea 13. STATE: New Mexico

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

<input type="checkbox"/> OIL 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 COMPLETION	<input type="checkbox"/> FRACTURE TREATMENT	<input 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) <u>Increase Injection Rate</u>	<input checked="" type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. SPECIAL 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.)*

The following work on subject well has been completed:

1. Pulled 2 3/8" OD internally plastic coated tubing with packer.
2. Clean out fill from 4660' to 4710' with sand pump.
3. Ran 2 3/8" OD internally plastic coated tubing with Packer.
4. Acidized casing perforations 4610' - 4654' with 1200 gals 15% NEA with a "mutual solvent" in 4 - 300 gal stages w/200# salt block between 1st and 2nd stage, 250# salt between 2nd and 3rd stage and 300# salt between 3rd and 4th stages. Used 300 gals gel brine water to carry each salt block.
5. Connect injection line, test and return to injection.

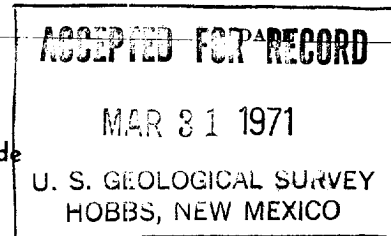
18. I hereby certify that the foregoing is true and correct

SIGNED: [Signature] Assistant District
TITLE: Superintendent DATE: March 29, 1971

(This space for Federal or State office use)

APPROVED BY: _____ TITLE: _____

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side

RECEIVED

APR 30 1971

U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

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WASHINGTON, D.C. 20535