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## N. M. CH. COMP. COMMERCE. P. O. FOX 1980

Form Approved. Budget Bureau No. 42-R1424

## HOBBS, NEW MEX UNITED STATES

JAMES A. GILLHAM

DISTRICT SUPERVISCISE Instructions on Reverse Side

	LEASE	
LC-	061869	

DEPARTMENT OF THE INTERIOR	1 70-001003
GEOLOGICAL SURVEY	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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME Cotton Draw Unit
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas cher	Cotton Draw Unit
	9. WELL NO.
2. NAME OF OPERATOR Texaco Inc.	7
3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Paduca Delaware
P.O.Box 728, Hobbs, NM 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.) AT SURFACE: 1080   FIRT & 660   FIRT	Sec.21,T-25-S,R-32-E
AT SURFACE: 1980 FEL & 660 FNL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH	Lea New Mexico
(Unit Letter 'B')  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. API NO.
REPORT, OR OTHER DATA	
war arrived by the state of the	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3448'(DF)
TEST WATER SHUT-OFF	
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
PULL OR ALTER CASING     USC 24	[98] change on Form 9-330.)
MULTIPLE COMPLETE  CHANGE ZONES	Control of the contro
ABANDON* Section (other)	
(other) CEWISH No.	-ALBURYSY Vivisiana
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is different measured and true vertical depths for all markers and zones pertinent.  Rig up. Pull rods & pump. Install BOP. If Clean out to TD.  Set pkr @ 4550'. Acidize 4½" csg perfs.  NEFE Acid in 2 stages using 150# rock sating 150#.	rectionally drilled, give subsurface locations and to this work.)*  Pull tubing.  4608'-4666' w/1000 gals 7½?
Install pumping equipment. Test & return	to production.
	•
Subsurface Safety Valve: Manu. and Type	
	Set @ Ft.
	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
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18. I hereby certify that the foregoing is true and correct  SIGNED	gr. date 12-21-81
18. I hereby certify that the foregoing is true and correct  SIGNED  TITLE ASST. DIST. M  (Orig. Sgd.) PETER W. CHISTER	gr. date 12-21-81
18. I hereby certify that the foregoing is true and correct  SIGNED  TITLE ASST. Dist. M  (Orig. Sgd.) PETER W. CHISTER  APPROVED BY  TITLE  TITLE  ASST. Dist. M	gr. date 12-21-81
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