

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**

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: **660' FNL & 1980' FWL**  
AT TOP PROD. INTERVAL: **(Unit Letter 'C')**  
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) <b>Shut-in</b>		

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5. LEASE  
**LC-062000**

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.  
**47**

10. FIELD OR WILDCAT NAME  
**Paduca Delaware**

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
**Sec. 28, T-25-S, R-32-E**

12. COUNTY OR PARISH  
**Lea**

13. STATE  
**New Mexico**

14. API NO.  
**3390' (DF)**

15. ELEVATIONS (SHOW DE, KDB, AND WD)

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.)\*

## REMARKS

is approval of temporary  
abandonment expires **4-1-80**

- Well Status - Shut-in Injector
- Temporary Abandonment Date - 3/1/79
- Reason for Abandonment - Water Channeling to producing Wells
- Future Plans - Evaluate for Remedial Work
- Date of Future Workover or Plugging - 1st Quarter, 1980

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED *[Signature]* TITLE **Asst. Dist. Supt.** DATE **March 28, 1979**

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

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APR 3 1979  
OIL CONSERVATION COMM.  
BOESS. R. M.

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OIL CONSERVATION COMM.  
BOESS. R. M.