

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FNL & 2310' FEL
AT TOP PROD. INTERVAL: (Unit Letter B)
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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☒
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Repair Casing Leak

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.
51

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.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3397' (DF)

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

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. INSTALL BOP.
2. TEST CASING FOR LEAKS.
3. SET CIBP @ 552'. CEMENT CSG LEAKS FROM 338-550' W/155 SX CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. WOC. DOC. TESTED CSG TO 500# FOR 30 MINUTES, 2:15 - 2:45 PM, 10-23-84. TESTED OK. PUSHED CIBP TO 4500'.
4. SET CEMENT RETAINER @ 3213'. SQUEEZE CSG 3420-3456' W/300 SX CLASS H CEMENT CONTAINING .5% D-19 ADDITIVE & 200 SX CLASS H CEMENT CONTAINING 2% CACL. WOC DOC. TEST. CSG LEAKED.

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

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

SIGNED W.B. Loh TITLE Asst Dist Mgr DATE 1-3-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY

JAN 8

*See Instructions on Reverse Side

Carlsbad

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JAN 14 1985

DEPT
HONORS OFFICE

5. SQUEEZE CASING LEAK 338-560' W/125 SX CLASS H CEMENT CONTAINING 2% CACL. WOC. DOC. TESTED CASING FROM SURFACE TO 3185' W/500#. TESTED OK.
6. TESTED CASING FROM SURFACE TO 4500' W/500# FOR 30 MINUTES, 9:30-10:00 AM, 11-2-84. TEST WITNESSED BY BLM REPRESENTATIVE.
7. PUSHED CIBP TO 4630'. DRILL PLUG AND CLEAN OUT TO 4710'.
8. SET PKR @ 4561'. ACIDIZE 4 1/2" CSG PERFS 4629-4670' W/500 GALS 15% NEFE ACID. FLUSH W.25 BBLs PRODUCED WATER.
9. INSTALL PUMPING EQUIPMENT. ON 24 HR POTENTIAL TEST ENDING 12-11-84, WELL PUMPED 19 BO & 219 BW. PLACE ON PRODUCTION.

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JAN 14 1985

C.C.
HOLDS OFFICE