

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 ☐ gas ☐ 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: **330' FNL & 330' FEL**
AT TOP PROD. INTERVAL: **(Unit Letter 'A')**
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
LC-0623
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.
55
10. FIELD OR WILDCAT NAME
Paduca Delaware
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 29, 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)
3376' (DF)

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) **Shut-in**

SUBSEQUENT REPORT OF:

☐
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☐
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☐
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RECEIVED

MAR 29 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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.)*

REMARKS

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

1. Well Status - Shut-in Injector
2. Temporary Abandonment Date - 3/1/79
3. Reason for Abandonment - Water Channeling to Producing Wells
4. Future Plans - Evaluate for Remedial Work
5. 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. Supr** DATE **March 28, 1979**

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACCEPTED FOR RECORD
MAR 30 1979
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

