| Form | 9-331 |
|------|-------|
| (May | 1963) |

DEPARTMENT OF THE INTERIOR verse side)

Form approved. Eddget Bureau No. 42-R1424.

6. IF INDIAN, ALLOTTEE OR TEIBE NAME

| 1 | | | | |
|---|-----|-----------------------------------|--|--|
| · | ,,, | 5. LEASE DESIGNATION AND SERVE NO | | |
| | | 1 72 030 PHZ 7249 20 | | |
| | 1 | T.C052742 (D) | | |

| GEOL | OGICAL SURVEY |
|---|--|
| SUNDRY NOTICES Do not use this form for proposals to Use "APPLICATION | AND REPORTS ON WELLS drill or to deepen or plug back to a different reservoir. FOR PERMIT—" for such proposals.) |

| | 7. UNIT AGREEMENT NAME |
|--|--------------------------------|
| OIL X GAS OTHER | 8. FARM OR LEASE NAME NCT-2 |
| TEXACO Inc. ADDRESS OF OPERATOR | C.C. Fristoe "B" Fed. |
| P. O. Box 728, Hoobs, New Mexico 88240 | 10. FIELD AND POOL, OR WILDCAT |

LOCATION OF WELL (Report location clearly and in accordance with any State requirements, See also space 17 below.)

At surface Unit letter P,660 feet from the South line and 660 feet from

| the East line, | Township 24S, | Range | 37E |
|----------------|---------------|-------|------|
| | (3) | | ota) |

14. PERMIT NO. 3175' DF Lea

16.

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

| NOT | ICE OF INTENTION TO: | SUBSEQUENT BEFORT OF: | | |
|---|--|--|-----|--|
| NOT) TEST WATER SHUT-OFF FRACTURE TREAT | PULL OR ALTER CASING MULTIPLE COMPLETE | WATER SHUT-OFF FRACTURE TREATMENT ALTERING CASING ABANDONMENT* | _ | |
| SHOOT OR ACIDIZE | ABANDON* | SHOOTING OR ACIDIZING ABANDONMENT | | |
| REPAIR WELL | CHANGE PLANS | (Other) (Note: Report results of multiple completion on Well-Completion or Recompletion Report and Log form.) | | |
| (Other) | | | -44 | |

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

- WELL STATUS To Be Reconditioned-Oil l.
- TEMPORARY ABANDONMENT DATE February, 1973 2.
- REASON FOR ABANDONMENT Not profitable to operate.
- FUTURE PLANS To be used in a Secondary Recovery Project.
- DATE OF FUTURE WORKOVER OR PLUGGING 1975

1975 NOV 1

oregoing is true and correct 18. I hereby certly DATE 10-21-74 SIGNED (This space for Federal or State APPROVED APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

OCT 2 4 1974