UN'TED STATES SUBMIT IN TRIP (Other instruction 1 re The state of DEPARTME

Form approved.
Budget Bureau No. 42-R1424.
LEASE DESIGNATION AND SERIAL NO.

3.	Acidize with 1	5484°, 400 ga]	5494', 5531', Ls 15% NE acid	5542 ', 5 - in 14	100 gal stages of gelled lease cm	90° and ! with one	5612. ball s e aler			
,	Acidize with 1 between each s	5484°, 400 ga]	5494', 5531', Ls 15% NE acid	5542 ', 5 - in 14	5553', 5562', 559 100 gal stages v	90° and ! with one	5612. ball s e aler			
,	Acidize with 1	5484°, 400 ga]	5494', 5531', Ls 15% NE acid	5542 ', 5 - in 14	5553', 5562', 559 100 gal stages v	90° and ! with one	5612. ball s e aler			
,		54841,	54941, 55311,	55421, 5	55531, 55621, 559	90' and	56121.			
- •		ፈ), ጸ), ተ	בויסויו בבאזו	(CIIC JOU	Snot at 5420', ; {{{c}};	543 71, 51	ші, 5щ6і, 5612і			
>_	Perforate 2 7/	′8" O. I	. Casing with	ane tet	-1-4 -4 MIMO 1					
			_		_					
1.	Pull rods and	-amuq	Spot 300 gals	acetic	acid over old pe	rforation	ns.			
ľhe	following work	t has be	en completed	on subject	ct well:	ψ ·		14 1 44 1		
						7				
- • •	proposed work. If well nent to this work.) *	is direction	nally drilled, give subs	urface location	s and measured and true v	ertical depths	for all markers an	d zones perti	j-	
17.	(Other)	PLETED OPE	RATIONS (Clearly state	all pertinent d	Completion or Re	completion Re	port and Log form.)	**************************************	_	
	REPAIR WELL	c	CHANGE PLANS		(Other)	esults of mult	iple completion on	Well		
	SHOOT OR ACIDIZE	'	ABANDON*		SHOOTING OR ACIDIZING	X	ABANDONMENT*			
	FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASIN			
	TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELI			
	NOTIC	CE OF INTEN	rion to:	1	80	BSEQUENT REI	ORT OF:			
16.	•	Check Ap	propriate Box To I	ndicate Nat	ure of Notice, Report,	or Other D	ata			
	Regular		31761 (D. F.)		Lea	a	N. M	•	
14.	PERMIT NO.		15. ELEVATIONS (Show		, GR, etc.)		OUNTY OR PARISH 13		_	
						Se	c. 35, T-24-	S, R-37	-E	
	West Line of Se			-		5-	SURVEY OR AREA	=		
		1 330° f	rom the South	Line, a	nd 2310 from the	<u> </u>	inebry	AND	_	
4.	LOCATION OF WELL (Repor See also space 17 below.) At surface	t location ci	early and in accordance.	e with any Sta	ite requirements.*		ELD AND POOL, OR W	ILDCAT		
	(1)		Box 728 - Hob			1				
3.	ADDRESS OF OPERATOR		D 200 W-1	N - N - 1	(9. WE	LL NO.		_	
	TEXACO Inc.						G. L. Erwin "a"			
	NAME OF OPERATOR	OTHER					M OR LEASE NAME	· · · · · · · · · · · · · · · · · · ·	_	
	OIL GAS OTHER						7. UNIT AGREEMENT NAME NONE			
	Us	e "APPLICA	TION FOR PERMIT—	for such prop	osals.)					
	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 "APPLICATION FOR PERMIT—" for such proposals.)						NONE			
	CLIVIDD				LWELLC		INDIAN, ALLOTTEE OR	TRIBE NAME	<u> </u>	
	2	<i>(</i>	SEOLOGICAL SU	RVFY		IC.	-032874-a			