Form 9-331

SUBMIT IN TRIPLICATE. HNI TO STATES

Form approved. Budget Bureau No. 42-R1424.

May 1963)	DEPARTMEN. JF THE INTERIOR (Other instructions of the interior of the instructions of the instruction of the	5. LEASE DESIGNATION AND SERIAL NO. LC-032874-(a)
S (Do not use	UNDRY NOTICES AND REPORTS ON WELLS this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL X GA	S LL OTHER	7. UNIT ACRESMENT NAME
TEXACO Inc		8. FARM OR LEASE NAME G. L. Erwin A Fed. 9. WELL NO.
P. O. BOX	728 - Hobbs, New Mexico 88240	10. FIELD AND POOL, OR WILDCAT.
See also space 1 At surface 1650' from	south line, 2310' from west line of Section 35,	Justis Devonian North Justis Tubb Drinkard 11. sec., T., R., M., OR BLE. AND SURVEY OR ABEA Sec. 35, T-24-S, R-37-E
Township 2	24-S, Range 37-E, Unit Letter 'K', Lea County, N.M.	12. COUNTY OR PARISH 13. STATE

		3182'	(DF)	Lea	New Mexico			
16.	Check A	Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data						
	NOTICE OF INTE	NTION TO:	SUBS	EQUENT REPORT OF:				
	FRACTURE TREAT SHOOT OR ACIDIZE	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (Note: Report resu Completion or Reco	REPAIRING ALTERING ABANDONM lits of multiple completion meletion Report and Log f	CASING ENT*			

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.) *

NMOCC ADMINISTRATIVE ORDER NO. DHC-169

1. Rig up.

14. PERMIT NO.

Perforate 2-7/8" OD Blinebry csg string in Tubb-Drinkard w/2 JSPF from 6090-6100'.

3. Perforate 2-7/8" OD Blinebry csg string in Devonian w/2 JSPF from 7190-7200'.

Set Bridge Plug in Blinebry @ 5700'. Abandon Blinebry zone.

Acidize Drinkard zone w/500 gals. 15% NE acid.

Acidize Devonian zone w/500 gals. 15% NE acid.

Run production equipment. Test and place on production.

18. I hereby certify that the foregoing is true and correct	TITLE Asst.	District Supt.	12-3-75
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	ADDROUM TOTAL	
	_	DECO R. S. SIGNES -	

*See Instructions on Reverse Side