DI

ADORECT DUTCHE HO. 42-10		
5. LEASE LC-057509		
6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
7. UNIT AGREEMENT NAME -		

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SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME -
eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas well other	G.L. Erwin "B" Fed. NCT-2
well 🐰 well 🗀 other	9. WELL NO.
2. NAME OF OPERATOR	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TEXACO Inc.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Justis Blinebry
P.O. Box 728, Hobbs, NM 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.)	Sec 35, T-24-S, R-37-E
AT SURFACE: 660' FSL & 660' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Unit Letter 'P' AT TOTAL DEPTH:	Lea New Mexico
AT TOTAL DEPTH:	14. API NO.
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)

	INDICATE NATURE OF NOTICE,		
REPORT, OR OTHER DATA		15. ELEVATIONS (SHOW DF, KDB, AND	W
REQUEST FOR APPROVAL TO:	SUBSECUENT REPORT OF:	3171' (DF)	
REQUEST FOR AFFROVAL TO.	SUBSEQUENT REPORT OF:	→ · · · · · · · · · · · · · · · · · · ·	
TEST WATER SHUT-OFF			
FRACTURE TREAT			

SHOOT OR ACIDIZE REPAIR WELL (NOTE: Report sults of multiple completion or zone PULL OR ALTER CASING change on Form 9-330.) [7] MULTIPLE COMPLETE CHANGE ZONES U. S. GEOLOGICAL SURVEY ABANDON* Test for csg leak (other)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state 2) 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.)*

٦. Rigged up 3-15-79. Kill well. Install BOP. Pull tubing.

Set RBP @ 4908'. Test 7" csg liner w/RTTS packer. Tested OK. Ran 9-5/8" RTTS tool & tested. Found wellhead leak. Repaired same.

3. Remove BOP & ran tubing. Swab well. Install pumping equipment.

On 24 Hr. potential test ending 6-27-79, well pumped 3 BO, 3 BW, GOR 14,000. 4.

Return to production.

		¥
Subsurface Safety Valve: Manu. and Type		Set @ Ft.
18. I hereby certify that the foregoing is true and correct		
SIGNED TITLE ASST. Dist.	Supt. DATE 7-2-79)
(This space for Federal or State of	office use)	on necould
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	PAREPTED	OR RECORD
*See Instructions on Reverse	JUL	3 1979 A SURVEY NEW MEXICO
*See Instructions on Reverse	J. HOBBS	, NEW III