

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions
verse side)Form Approved
Budget Bureau No. 42-R1424

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-057509	
2. NAME OF OPERATOR TEXACO Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --	
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME --	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Well is located 1980' from the South Line and 330' from the East Line of Section 35, T-24-S, R-32-E, Lea County, New Mexico. (Unit Letter I)		8. FARM OR LEASE NAME G. L. Erwin "B" Fed.	
14. PERMIT NO. Regular		9. WELL NO. 3	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3161' DF		10. FIELD AND POOL, OR WILDCAT North Justice (Fusselman)-E	
		11. SEC. T. R. M. OR BLM. AND SURVEY OR AREA Sec. 35, T-24-S, R-37-E	
		12. COUNTY OR PARISH Lea	
		13. STATE New Mexico	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>			

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

TEXACO Inc. proposes to do the following work on subject well:

1. Pull hydraulic pumping equipment from Fusselman zone.
2. Run correlation log and perforate fusselman string with 2 shots per foot from 7072', 7079', 7098', 7110', 7120'-7132' and 7146'-7152'.
3. Run 1" Kobe tubing to approximately 7150' and spot acid across new perforations 7072'-7152'.
4. Pull Kobe tubing.
5. Acid perforations 6993'-7152' with 2500 gals of 15% HCL NE acid as follows; 500 gals of acid followed with 150 lbs unibeads in 150 gals gelled lease crude. Follow with 2 - 1000 gal stages of acid, separated with 50 lbs unibeads in 50 gal gelled lease crude. Flush with 35 bbls lease crude.
6. Swab back acid residue.
7. Run hydraulic pumping equipment and return to production.
8. Clean location.

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

Assistant District
Superintendent

DATE

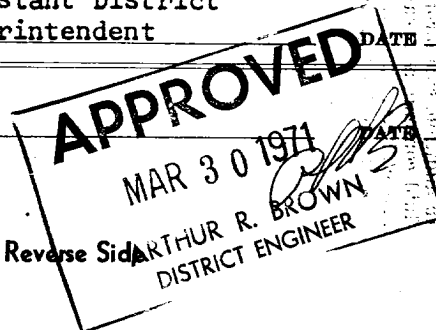
3-29-71

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE



*See Instructions on Reverse Side

RECEIVED

APR 9 1971

OIL CONSERVATION COMM.
40225 N. W.