

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐  
2. NAME OF OPERATOR  
TEXACO Inc.  
3. ADDRESS OF OPERATOR  
P. O. Box 728, Hobbs, New Mexico 88240  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FEL and 2310'  
AT TOP PROD. INTERVAL: FNL (Unit Letter H)  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:  
TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) Extension Request

SUBSEQUENT REPORT OF:

RECEIVED

DEC 3 1979

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

5. LEASE  
NM-14218  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
-  
7. UNIT AGREEMENT NAME  
-  
8. FARM OR LEASE NAME  
C. C. Fristoe "B" NCT-2  
9. WELL NO.  
6  
10. FIELD OR WILDCAT NAME  
Justis Fusselman (North)  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 35, T-24-S, R-37-E  
12. COUNTY OR PARISH  
Lea  
13. STATE  
New Mexico  
14. API NO.  
-  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3178' (DF)

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 - Shut-in
- Temporary Abandonment Date - 11-10-78
- Reason for Abandonment - Not economical to operate
- Future Plans - A recommendation for remedial work has been submitted and is currently under study.
- Date of Future Workover or Plugging - 4th Quarter, 1980.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED [Signature] TITLE ASST. Dist. Supt. DATE 11/29/79

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DEC 5 1979

ACTING DISTRICT ENGINEER