

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE  
(Other instructions on reverse 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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-032592	
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 666' from the North Line and 660' from the West Line, Unit Letter D, Section 35, T-24-S, R-37-E, Lea County, New Mexico.		8. FARM OR LEASE NAME C. C. Fristoe "A" Fed. NCT-1	
14. PERMIT NO. Regular		9. WELL NO. 6	
15. ELEVATIONS (Show whether DF, RT, GH, etc.) 3195' (D. F.)		10. FIELD AND POOL, OR WILDCAT Langlie-Mattix	
		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	

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 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) Convert to Injection <input checked="" 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.)\*

Subject well was originally completed in the Langlie-Mattix Field but this zone was abandoned and sealed off with a cast iron bridge plug. The well was re-completed as a gas well in the Jalmat Gas pool. By authority of NMOCC Authorization for Dual Completion and Waterflood, number R-3625, TEXACO Inc. proposes to do the following work:

1. Kill well and pull tubing from Jalmat Gas Zone.
2. Drill out hydromite and Cast Iron Bridge Plug with Baker Sand Line Drill.
3. Run Baker Model "D" Packer and set @ 3300'.
4. Run 3300' 2 3/8" O. D. internally plastic coated tubing and latch into packer.
5. Install flow controller and begin injection of water into the Langlie-Mattix zone.
6. Return well to production and produce as a dual completed gas well (Jalmat Gas) and water injection (Langlie-Mattix).

PLEASE CANCELL NOTICE OF INTENTION (9-331) FILED DECEMBER 16, 1968 AND APPROVED DECEMBER 17, 1968, IN FAVOR OF THE ABOVE PROPOSAL. ORIGINAL NOTICE INDICATED JALMAT ZONE AS THE ZONE ON WHICH THE WORK WOULD BE DONE AND FAILED TO SHOW TEXACO'S INTENTION TO DUAL COMPLETE THE WELL.

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

SIGNED

Assistant District  
Superintendent

DATE December 31, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
DEC 31 1968  
A. H. BRUNN  
DISTRICT ENGINEER

\*See Instructions on Reverse Side