

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructor 1 re-
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. NM-LC-032592 - (a)
2. NAME OF OPERATOR TEXACO Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME NONE
3. ADDRESS OF OPERATOR P. O. Box 728 - Hobbs, New Mexico		7. UNIT AGREEMENT NAME NONE
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Well located 990' from the South Line, and 405' from the East Line of Section 3, T-25-S, R-37-E, Lea County, New Mexico.		8. FARM OR LEASE NAME C. C. Fristoe "a" NCT-2
14. PERMIT NO. Regular		9. WELL NO. 8
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3137' (GR)		10. FIELD AND POOL, OR WILDCAT Justis Blinbry & Drinkard
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T-25-S, R-37-E
		12. COUNTY OR PARISH Lea
		13. STATE N. M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐

(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.)*

Total Depth - 6250'
8 5/8" O. D. Casing Cemented at 1011'

Ran 6240' of 2 7/8" O. D. Casing, 6.50 LB, NEW, J-55, and cemented at 6250' with 400 Sx. Incor 8% gel with FRA, plus 200 Sx. Incor 8% gel, and 400 Sx. Incor 4% gel. Plug at 6225'. Job complete 11:00 A. M. November 27, 1964.

Tested 2 7/8" O. D. Casing for 30 minutes with 1500 P. S. I. from 8:00 A. M. to 8:30 A. M. November 29, 1964. Tested O. K. Job complete 8:30 A. M. November 29, 1964.

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

SIGNED

W. E. Morgan

TITLE Assistant to the District
Superintendent

DATE November 30, 1964.

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

ACTING DISTRICT ENGINEER