|   |   |                                   |  | and the second |
|---|---|-----------------------------------|--|--|
| Form 9-331<br>(May 1963)<br>UN ED STATES SUBMIT IN TRIP' TE-<br>DEPARTMEN: OF THE INTERIOR (Other instruction.<br>DEPARTMEN: OF THE INTERIOR verse side)<br>GEOLOGICAL SURVEY                 |   |                                   |  |  |
|   |   |                                   |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME   |
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.<br>Use "APPLICATION FOR PERMIT—" for such proposals.) |   |                                   |  | NONE   |
| 1.<br>017. GAS  | OTHER   |                                   |  | 7. UNIT AUREEMENT NAME<br>NONE   |
| 2. NAME OF OPERATOR   |   |                                   | an a                                 | 8. FARM OR LEASE NAME  |
|   | TEXACO Inc.                                   |                                   |  | C.C. Fristoe "a" NCT-1<br>9. WELL NO.  |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 728 - Hobbs, New Mexico   |   |                                   |  | 11   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>Well located  |   |                                   |  | Sec. 35, T-24-S, R-37-E  |
| 14. PERMIT NO.<br>Regular   |   | (Show whether DF, RT,<br>)]: (GR) | GR, etc.)  | 12. COUNTY OF PARISH 13. STATE   Lea N. M.   |
| 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data   |   |                                   |  |  |
|   | NOTICE OF INTENTION TO :                      |                                   |  | SEQUENT REPORT OF:   |
| TEST WATER SHUT<br>FRACTURE TREAT<br>SHOOT OR ACIDIZE   | MULTIPLE COMPLI                               |                                   | WATER SHUT-OFF<br>FRACTURE TREATMENT<br>SHOOTING OR ACIDIZING<br>(Other) | X REPAIRING WELL -   ALTERING CASING   ABANDONMENT*.   |
| (Other)   | CHANGE PLANS                                  |                                   | (NOTE: Report res<br>Completion or Reco                                  | ults of multiple completion on Well.<br>mpletion Report and Log form.) :   |
| 17. DESCRIBE PROPOSED<br>proposed work,<br>nent to this work  | It well is directionally utilied, giv<br>.)*  | Total Dept                        |  | tes, including estimated date of starting any<br>rtical depths for all markers and zones perti-                  |
| 98 <b>0'</b> v  | with 300 Sx. Class "C                         | " 4% gel, plu                     | LB, Spiral Weld,<br>15 150 Sx. Class                                     | NEW, and cemented at<br>"C" with 2% CACL. Plug   |
| at 950  | ). Cement Circulate                           | d•                                |  | 에 유통 유명이 있는 유명 등 유<br>성기적 기회는 관계 성격 등 공  |
| Temper<br>Bottor  | rature of mixing slur<br>n Hole Temperature - | ry - 82 degr<br>70 degrees.       | ees, Strength 12<br>Job complete 7:0                                     | Hours 1600 P. S. I.<br>O P. M. June 7, 1965.   |
| to 8:<br>for 3  | $n \wedge M$ Tune 8 7065                      | S. I. from                        | 8. Driffed ceme<br>9:00 A. M. to 9:3                                     | • I. from 8:00 A. M.<br>nt plug and re-tested<br>O A. M. June 8, 1965.   |
| •   |   |                                   |  |  |
| 18. I hereby certify t  | hat the foregoing is true and corre           | - mumur Assi                      | stant District<br>uperintendent  | June 9, 1965   |
| (This space for F   | ederal or State office use)                   |                                   |  |  |
| APPROVED BY _<br>CONDITIONS OF  | APPROVAL, IF ANY:                             | TITLE                             | Af   | PROVED   |
|   |   |                                   | ι.   | IUN 1 01965 3 233  |
|   |   | *See Instructions                 | on Reverse Side  | L. GORDON  |

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ACTING DISTRICT ENGINEER