|   |  |  |  |                        |  | ,  |  |  |
|---|--|--|--|------------------------|--|--|--|--|
| Form 9-331<br>(May 1963)  |  |  |  |                        |  | Form approved, Budget Bureau No. 42-R1424.  5. Leane Designation and Serial No.  LC - 061936 - A |  |  |
|   |  |  |  |                        |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME   |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form far proposals to diffi of the deepen or plug back to a different reservoir.  Use Authorized Tion For Permit—" for such proposals.) |  |  |  |                        | None   | Mone   |  |  |
| . Well drilled as a dry gas well and  |  |  |  |                        | 7. UNIT AGREEME                                | 7. UNIT AGREEMENT NAME   |  |  |
| OIL GAS   | out Cas Salvace has been deferred until now. |  |  | Cotton                 | Cotton Draw Unit                               |  |  |  |
|   | NAME OF OPERATOR                             |  |  |                        |  | 8. FARM OR LEASE NAME  |  |  |
| TEXACO Inc.   |  |  |  |                        | Cotton   | Cotton Draw Unit   |  |  |
| 3. ADDRESS OF OPERATOR  |  |  |  |                        |  | 9. WELL NO.  |  |  |
| P. O. 728, Hobbs, New Mexico 88240  |  |  |  |                        |  | 66   |  |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  Nee also space 17 below.)   |  |  |  |                        |  | 10. FIELD AND POOL OF WILDCAT Undesignated Horrow Cas  |  |  |
| Well is located 760' from the West Line, and 2080' from the North Line of Section 10, T-25-S, R-32-E, Lea County, New Mexico.   |  |  |  |                        | SURVEY OR                                      | Sec. 10, T-25-S,   |  |  |
| 14. PERMIT NO.  |  | 15. ELEVATIONS (Show w                                       | whether DF, RT, GR,                        | tc.)                   | 12. COUNTY OR I                                | PARISH 13. STATE   |  |  |
| Regi  | ular   |  | 34791 (D.                                  | , F.)                  | Lea  | New Mexico   |  |  |
| TOT WATER SHE   | NOTICE OF INTERIOR TO                        |  |  | QUENT REPORT OF:       |  |  |  |  |
| TEST WATER SHU  | T-OFF  | PULL OR ALTER CASING   |  | RACTURE TREATMENT      | <u> </u>                                       | LING CASING  |  |  |
| FRACTURE TREAT  | _  | MULTIPLE COMPLETS ABANDON*                                   | -  | HOOTING OR ACIDIZING   | ABANI  | OONMENT* X   |  |  |
| SHOOT OR ACIDIZI  | ·  | CHANGE PLANS   |  | Other)                 |  |  |  |  |
| (Other)   | اسسما  |  |  | (Nore: Report resu     | lts of multiple compl<br>apletion Report and I | etlon on Well<br>Log form.)  |  |  |
| 17. DESCRIBE PROPOSE proposed work, nent to this wor  | If well is dire                              | OPERATIONS (Clearly state all ctionally drilled, give subsur | l pertinent details<br>rface locations and | and give portingnt dat | es including estimat                           | ed date of starting any  |  |  |
| Subject well  | l has been                                   | plugged and abar   | ndoned as i                                | `ollows:               |  |  |  |  |
| י ריי מי  | /on ag 1 1                                   |  |  |                        |  |  |  |  |
| 1. Pull 3 1/2" CS hydrill tubing. 2. Set CI bridge plug in 7 5/8" casing @ 12,450'.   |  |  |  |                        |  |  |  |  |
|   |  | •  |  |                        |  |  |  |  |
| 3. Spot 40 :  | -  | •  |  |                        |  |  |  |  |
| Load hole   |  |  |  |                        |  |  |  |  |
| 5. Spot 20  |  |  |  |                        |  |  |  |  |
|   |  | cleaned up locati  |  |                        | extending 4.                                   | above  |  |  |
| ground le   | svel. Plu                                    | g and abandon cor  | mbrere antl                                | 7 25, 1966.            |  |  |  |  |
|   |  |  |  |                        |  |  |  |  |
|   |  |  |  |                        |  | *  |  |  |
|   |  |  |  |                        | N 5 4  |  |  |  |
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|   |  |  |  |                        |  |  |  |  |

| 18. I hereby certify that the foregoing is true and correct SIGNED                        | TITLE . | Assistant District Superintendent DA | тв <u>July 29, 196</u> 8 |
|---|---------|--------------------------------------|--------------------------|
| (This space for Federal or State office use)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY: | TITLE . | APPROVE                              | <b>D</b>                 |

AUG 7 1968