

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLI  
(Other instructions  
reverse side)5\*  
re-Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

NM-054031

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

None

8. FARM OR LEASE NAME

Cotton Draw Unit

9. WELL NO.

73

10. FIELD AND POOL, OR WILDCAT

Undesignated

11. SEC. T., R., M., OR BLK. AND  
SURVEY OR AREASec. 4, T-25-S,  
R-32-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

## 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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> 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 and in accordance with any State requirements. See also space 17 below.) At surface Well is located 554' from the North Line and 554' from the East Line of Section 4, T-25-S, R-32-E, Unit Letter A, Lea County, New Mexico.	
14. PERMIT NO. Regular	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3513' (D. F.)

10.

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 4870'  
PLUG BACK TOTAL DEPTH 4848'  
4 1/2" O.D. CASING SET @ 4868'

Perforate 4 1/2" O.D. Casing with 2/JSPF from 4768' to 4778'. Job complete 3:30 P.M., December 27, 1968.

Ran 2 3/8" O.D. Tubing with packer and set @ 4597'. Acidize casing perforations with 500 gals. 15% NE Acid. Job Complete 12:30 P.M., December 28, 1968.

Swab Well.

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

SIGNED

TITLE

Assistant District

Superintendent

DATE December 31, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

APPROVED

DATE

CONDITIONS OF APPROVAL, IF ANY:

JAN 2 1969

\*See Instructions on Reverse Side

J. L. GORDON  
ACTING DISTRICT ENGINEER