Form 9-331 (May 1963)	UNI D STA DEPARTMENI OF TH GEOLOGICAL	IE INTERIOR	SUBMIT IN TRIPLIC (Other instructions verse side)	e- Budg	approved, et Bureau No. 42-R1424. INATION AND BERIAL NO.	
	NDRY NOTICES AND R	EPORTS ON WELLS		6. ŵ îndian, 2	6. IF INDIAN, ALLOTTEN OR TRIBE NAME	
1.			······		MENT NAME	
OIL GAN WELL WELL	у отнык .			None		
2. NAME OF OPERATOR	······································	Province and a second		8. FARM OR LE	8. FARM OR LEANE NAME	
3. ADDGERB OF OPERATO	TEXACO Inc.	<u> </u>		Cotton 9. WELL NO.	Draw Unit	
P. O. Box 728, Hobbs, New Mexico 88240					73	
4. ECCVERON OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At parface					noon, on without gnated	
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,					, M., OR REK. AND OR AREA	
Lea County,	New Mexico.	مدانیا استان است.	· · · · · · · · · · · · · · · · · · ·	Sec. h,	T-25-S, R-32-E	
14. PERMIT NO.	15, ELEVATIONS (S	Show whether DF, RT,		_	PARISH 13. STATE	
Regular		3513' (Lea	New Mexico	
16.	Check Appropriate Box T	o Indicate Natu	e of Notice, Report, o	or Other Data		
	NOTICE OF INTENTION TO :		SUB	SEQUENT REPORT OF:	: 	
TEST WATER SHUT-	OFF PULL OR ALTER CAS	NG	WATER SHUT-OFF	X REP	AIRING WELL	
FRACTURE TREAT	MUTITICS COMPLET	a	РВАСТИЦЯ ТИКАТМЕNT		ERING CARING	
REPARE WELL	CHANGE PLANE		SHOOTING OR ACIDIZING		NDONMENT*	
(Other)			(Note: Report res	uits of multiple com impletion Report and	pletion on Well Log form.)	
Ran 153 J - 55 Cas 10# salt Job comp	7 5/8" O.D. 15.28/ Joints, 4858', of 4 1 sing and cemented @ 48 t per sack. Plug @ 48 plete 3:30 P.M., Decem	TOTAL DEPTH and 24// Casi /2" 0.D. 9.5 68' with 15 48'. ber 25, 1968	1 48701 ing comented at 1 60#, 10.50#, 11.6 60 Sx. Class "C"	474' 60# N-80 and cement with		
10:00 A.	1 1/2" 0. D. csg. with M., December 27, 196	8. Tested C) • K •	9:30 A. M. T	0	
Job Comp	plete 10:00 A. M., Dec	ember 27, 19	968 .			
	·	·				
18. I hereby certify the	at the foregoing is true and correct	Assi	stant District			
SIGNED	Milles	TITLE Supe	erintendent	DATE <u>D</u>	<u>ecember31, 1968</u>	
(This space for Fee	deral or State office use)			PROVED		
APPROVED BY	APPROVAL, IF ANY :	TITLE		DATE		
COMPATIONS OF A			JAN	1 2 239		
	*\$6	e Instructions on	ـ. (.	GORDON DISTRICT ENGINEER		

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