Form 3160-5 (June 1990)

TED STATES DEPART: INT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

å. å FORM APPROVED Budget Bureau No. 1004-0135

Expires: March 31, 1993

(A, A)		
SUNDRY NOTICES AND REPORTS ON WELLS	5. Lease Designation and Serial No. NM 25876	
Do not use this form for proposals to drill or to deepen or reeflip to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals - Ar IES.	6. If Indian, Alottee or Tribe Name	
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation	
1. Type of Well: OIL GAS OTHER	8. Well Name and Number GETTY '24' FEDERAL	
Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	13	
3. Address and Telephone No. 15 SMITH ROAD, MIDLAND, TX 79705 915-687-737	5 9. API Well No. 30-015-31801	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter O: 990 Feet From The SOUTH Line and 2310 Feet From The	10. Field and Pool, Exploaratory Area LIVINGSTON RIDGE DELAWARE	
EAST Line Section 24 Township 22-S Range 31-E	11. County or Parish, State EDDY , NM	
12. Check Appropriate Box(s) To Indicate Nature of Notice, F	Report, or Other Data	
TYPE OF SUBMISSION	YPE OF ACTION	
Abandonment Recompletion	Change of Plans New Construction	
✓ Notice of Intent Plugging Back	Non-Routine Fracturing	
Subsequent Report Casing Repair	Water Shut-Off	
Final Abandonment Notice Atlering Casing	Conversion to Injection	
✓ OTHER: REQUEST EXTENS	SION Dispose Water	
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)	

TEXACO EXPLORATION AND PRODUCTION INC. IS REQUESTING AN EXTENSION ON THE SUBJECT WELL APPROVAL DATED 5-18-01.

DUE TO RIG SCHEDULING, THIS WELL CANNOT BE DRILLED BY THE EXPIRATION DATE.

A COPY OF THE ORIGINAL APPROVAL IS ATTACHED FOR YOUR CONSIDERATION.

14 I hereby certify that the prespong is true and correct SIGNATURE MULL	Raketitle	Regulatory Specialist	DATE	1/31/02
TYPE OR PRINT NAME J. [Denise Leake			
(This space for Federal or State office use)				
APPROVED 88 NOITIONS OF APPROVAL, IF ANY:	TITLE		_DATE	
Title 18 U.S.C. Section 1001, makes it a crime for any representations as to any matter within its jurisdiction.	person knowingly and willfully to mal	se to any department or agency of the United States an	y faise, fictitious or fraudulent state	ements of

^{13.} Describe Proposed or Completed Operations (Cleary 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,)*.

(August 1999)

DEPARTMENT OF THE INTERIOR BUREAU AND MANAGEMENT

OMB NO. 1004-0135 Expires: November 30, 2000

Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. 6. If Indian, Allottee or Tribe Name

NM-25876

SUBMIT IN TRIPLICATE - Other instructions on reverse side			7. If Unit or CA/Agreement, Name and/or	
1. Type of Well			in the state of th	
X Oil Well Gas Well Other		•		8. Well Name and No.
2. Name of Operator				GETTY '24' FEDERAL #13
Texaco Exploration & Production		•		0 1011111111111111111111111111111111111
3a. Address	3	b. Phone No. (:nclude ar	ea code)	9. APLWEILNO. 30-015 - 318101
500 N. Loraine Midland, Texas 79°	i	(915) 688-460		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey				LIVINGSTON RIDGE, DELAWARE
UNIT LETTER O, 990' FSL & 2310' FEL	L, SEC 24, T-22-S,	R-31-E		, , , , , , , , , , , , , , , , , , , ,
				11. County or Parish, State
		:	···	EDDY NM
12. CHECK APPROPRIATE	E ECX(ES) TO NDK	DATE NATURE OF	NOTICE, REPO	ORT, OR OTHER DATA
TYPE OF SUBMISSION		TYF	PE OF ACTION	
X Notice of Intent	Acidize	Deepen	Production	(Start Resume) Water Shut-Off
	Alter Casing	Fracture Treat	Reclamatio	n Well Integrity
Subsequent Report			\equiv	
	Casing Repair	New Construction	Recomplete	
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporaril	y Abandon OPERATOR TO TEXACO
	Convert to Injection	Plug Pack	Water Disp	osal
CHANGE OPERATOR FROM POGO PRODUCI		\$	14/14Y	24 2 57/ Le C. Carry
14. Thereby certify that the foregoing is true and correct		Title		
Name (Printed Typed) A. Phil Ryan				
All Ayary		Commiss	sion Coordin	ator
C. Thil Kyan	W-1,	Date 5/14/01		
THIS	S SPACE FOR FEDER	RAL OR STATE OFF	ICE USE	
Approved by	•	Title		Date
Conditions of approval, if any, are attached. Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the	those rights in the subject	int or Office lease	•	
Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section States any false, fictitious or fraudulent statements or repr	n 1212, makes it a crime for	any person knowingly an	d willfully to mak	te to any department or agency of the United