

5. LEASE DESIGNATION AND SERIAL NO.

SF-078357-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		92 OCT -0 PM 1:06		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR TEXACO EXPLORATION AND PRODUCTION INC.		019 FARMINGTON, N.M.		8. FARM OR LEASE NAME J. O. MARSHALL	
3. ADDRESS OF OPERATOR P. O. Box 3109, Midland, Texas 79702				9. WELL NO. 4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FSL & 1820' FWL, UNIT LETTER N, SE/SW				10. FIELD AND POOL, OR WILDCAT BASIN FRUITLAND COAL	
				11. SEC., T., R., OR BLK. AND SURVEY OR AREA SEC. 1, T-27-N, R-9-W	
14. PERMIT NO. API - 30 045 28683		15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR-5961', KB-5974'		12. COUNTY OR PARISH SAN JUAN	
				13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) COMPLETION <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)*

- MIRU COMPLETION UNIT. TIH & TAG CEMENT @ 2107'. PBD 2107'. TESTED CASING TO 3000# FOR 30 MINUTES 09-30-92.
- PERF w/ 4 JSPF: 1931, 1938-41, 1966-82, 1989-92, 1994-96, 1998-99, 2001, 2010-12, 2016, 2018-31, 2069-71. 180 HOLES. 09-30-92.
- DOWELL ACIDIZED WITH 2250 GAL 7 1/2% NEFE. 09-30-92.
- DOWELL FRACED WITH 92000 GAL 70 QUALITY N2 FOAM WITH 25400# 40/70 SAND AND 199400# 20/40 SAND. JOB COMPLETE 10-01-92. MAX PSI: 2470, MIN PSI: 1900, AVE PSI: 2200, AVE RATE 52 BPM.
- TIH & CLEAN OUT SAND.
- TIH WITH 2 3/8 PRODUCTION TUBING. SEATING NIPPLE @ 1929'.
- FLOWED 21 HOURS 10-06-92. RECOVERED 66 MCFPD.
- TESTING.

RECEIVED
OCT 22 1992
OIL CON. DIV.
DIST. 3

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

SIGNED C.P. Basham / cwH TITLE DRILLING OPERATIONS MANAGER DATE 10-07-92

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

OCT 20 1992

NMOCD

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA
BY SMW