Form 3160-5

UNITED STATES

SUBMIT	IN	TRI	PLICA	TE*
(Other reverse	ins	truç	tions	on
reverse	3	ide)		

Form approved.

Budget Bureau No. 1004-0135
Expires August 31 1985

Formoriti V-3311	ENT OF THE INTERIOR OF LAND MANAGEMENT	reverse side)	5. LEASE DESIGNATION A NM 014378	ND SERIAL NO.	
(Do not use this form for proposals	ES AND REPORTS Of to drill or to deepen or plug back FOR PERMIT-" for such proposals.)	N WELLS to a different reservoir.	6. IF INDIAN, ALLOTTEE C	R TRIBE NAME	
1. OIL GAS WELL X OTHER			7. UNIT AGREEMENT NAM	ΙE	
WELL WELL OTHER 2. NAME OF OPERATOR			8. FARM OR LEASE NAME		
TEXACO EXPLORATION AND PRODUCTION INC.			H.J. LOE FEDERAL -B-		
3. ADDRESS OF OPERATOR	Tayae 79702		9. WELL NO.		
P. O. Box 3109, Midland, Texas 79702 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*				10. FIELD AND POOL, OR WILDCAT	
See also space 17 below.) At surface		BASIN FRUITLAND COAL			
995' FNL & 950' FEL, UNIT LE	TTER A, NE/NE		11. SEC., T., R., OR BLK. A SURVEY OR AREA	IND	
			SEC.23, T-29-N		
14. PERMIT NO.	15. ELEVATIONS (Show whether D	F, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE	
API - 03 045 28684	GR-5676', KB-5690'	e Nature of Notice, Repor			
16. UNDER AP	· •		ENT REPORT OF:		
		1	REPAIRING WE	\square	
120, 112, 213, 211	ULL OR ALTER CASING HULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	ALTERING CAS		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	BANDON*	SHOOTING OR ACIDIZING	ABANDONMENT	r * 🔲	
	HANGE PLANS	(Other) PRODUCTION CA	SING of multiple completion on	X	
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPE		Completion or Recomp	letion Report and Log form	1./	
1. DRILLED 7 7/8 HOLE TO 183 2. ATLAS RAN GR-SP-DISFL, G 3. RAN 45 JTS OF 5 1/2, 15.5 BOTTOM 300' AND 5 VANE CEN 4. DOWELL CEMENTED WITH 5 Cacl2 (13.7ppg, 1.23cf/s). PL 5. ND. RELEASE RIG AT 4:30pm 6. PREP TO COMPLETE.	R-ML-CAL, & GR-ZDL-CAL #, WC-50, LTC CASING SE TRALIZERS ACROSS OJO AL DO SACKS 50/50 POZ CLA: LUG DOWN AT 1:30pm 08-	. From 1830' to 577'. Pul Et @ 1830'. Ran 5 convent .amo. SS G w/ 2% Gel, 5% Salt,	1/4# FLOCELE, .4 ACKS.	% D112, 1% RECE BL 92 SEP -2	
18. I hereby certify that the foregoing is to	ue and correct	SEP1 01 OIL COM DIST.	· Live -	MED	
SIGNED C.P.Bashan	•	LLING OPERATIONS MANAGEI	R DATE 08	-31-92	
(This space for Federal or State office	use)		ACCEPTED FOR	HELUHU	
APPROVED BY	TITLE		DATE		
CONDITIONS OF APPROVAL, IF ANY:			SEP 0 4 19	192	
	*See Instruction	ıs on Reverse Side	FARMINGTON RESO	URCE AREA	

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