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OIL CONSERVATION DIVISION P.O. Box 2008 Santa Fe, New Mexico 87504-2088

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Box Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-20212 5. Indicate Type of Lease STATE [] FEE [X] 6. State Oil / Gas Lease No. 7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT 8. Well No. 36 9. Pool Name or Wildcat VACUUM GLORIETA

SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: OIL WELL [X] GAS WELL [] OTHER [] 2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC. 3. Address of Operator P.O. BOX 730, HOBBS, NM 88240 4. Well Location Unit Letter [] : 1650 Feet From The SOUTH Line and 790 Feet From The EAST Line Section 25 Township 17S Range 34E NMPM LEA COUNTY 10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3997 DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK [] PLUG AND ABANDON [] TEMPORARILY ABANDON [] CHANGE PLANS [] PULL OR ALTER CASING [] OTHER [] SUBSEQUENT REPORT OF: REMEDIAL WORK [] ALTERING CASING [] COMMENCE DRILLING OPERATION [] PLUG AND ABANDONMENT [] CASING TEST AND CEMENT JOB [] OTHER: CASING INTEGRITY TEST FOR TA STATUS [X]

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. PRIOR STATUS OF THIS WELL WAS PRODUCING OIL WELL (TEPI INTERNAL STATUS: PM). 7/22/95 1. NOTIFIED NMOC. TOH W/ PRODUCTION EQUIPMENT. 2. SET CIBP @ 5900'. CIRCULATED HOLE W/ INHIBITED FLUID & TESTED AS PER NMOC GUIDELINES TO 500# FOR 30 MINUTES, HELD OK. 3. TOH W/ TBG. REQUEST TEMPORARILY ABANDON WELL STATUS THROUGH 8/1/2000. (ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK) (NEW TEPI INTERNAL STATUS: TR-O)

This Approval of Temporary Abandonment Expires 8/1/2000

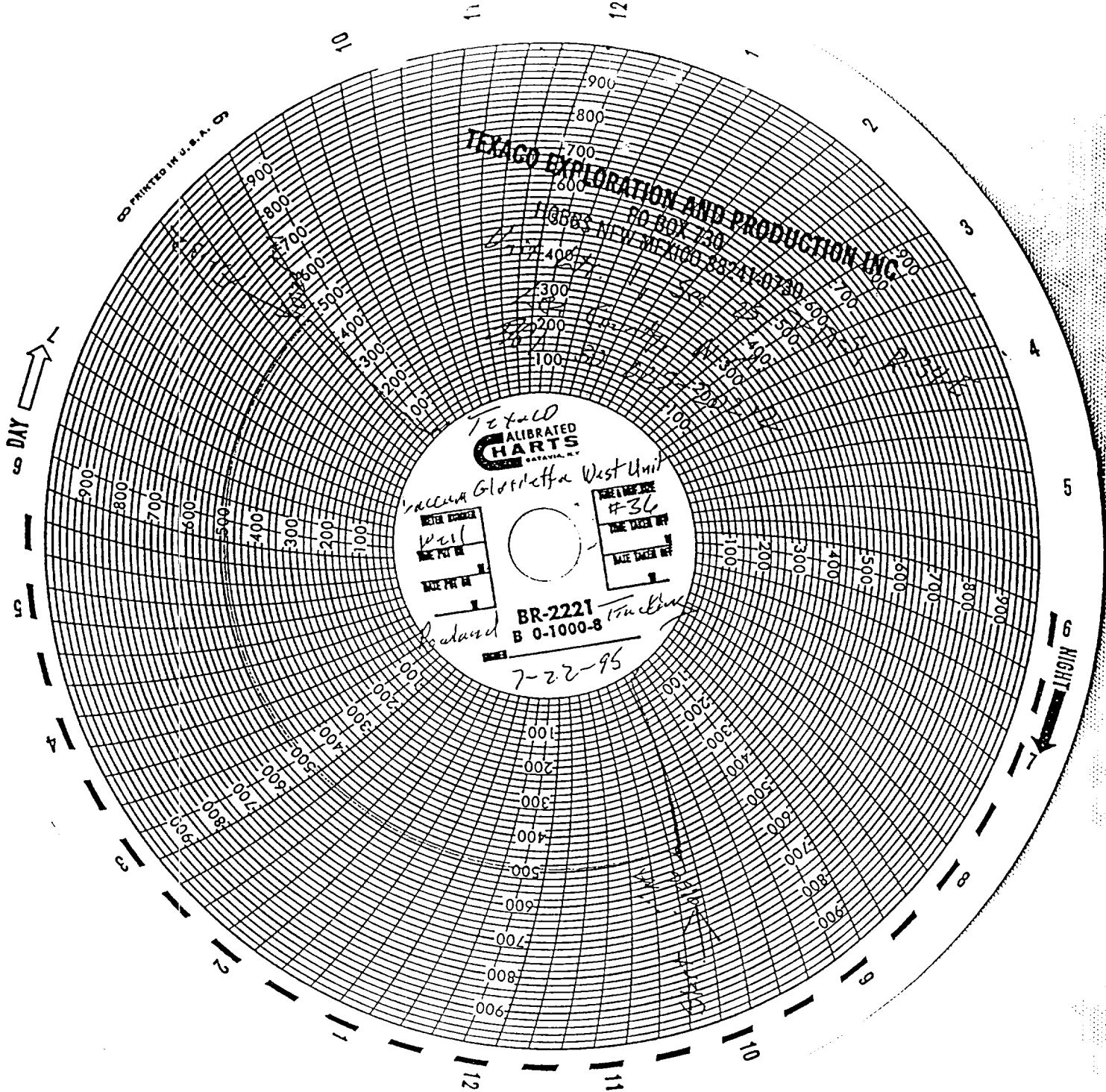
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE [Signature] TITLE Engr Asst DATE 8/3/95 TYPE OR PRINT NAME Monte C. Duncan Telephone No. 397-0418

(This space for State Use) APPROVED BY [Signature] TITLE [Title] DATE SEP 13 1995 CONDITIONS OF APPROVAL, IF ANY: DeSoto/chois 10-94 ver 2.0

PRINTED IN U.S.A. 9

DAY

NIGHT



DATE 7-22-95

WELL NAME Vacuum Gloria West Unit #36

SUPERVISOR Don Diamond

PACKER TYPE CIBP 5900

PACKER SETTING DEPTH _____

PERFORATIONS 6000'