

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88241-1980  
DISTRICT II  
P.O. Box Drawer DD, Artesia, NM 88211-0719  
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410  
DISTRICT IV  
P.O. Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals and Natural Resources Department

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-102  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies  
☐ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

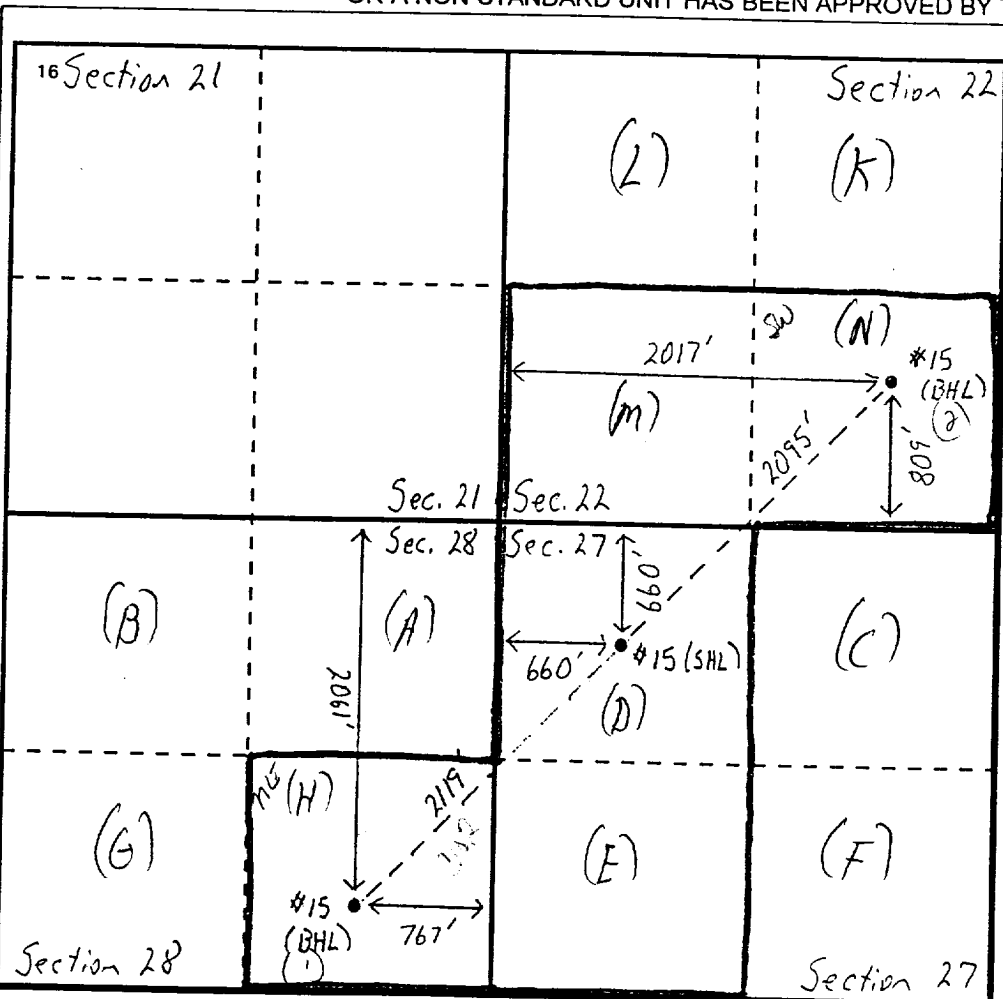
<sup>1</sup> API Number 30-025-23905	<sup>2</sup> Pool Code 61760	<sup>3</sup> Pool Name VACUUM ABO NORTH
<sup>4</sup> Property Code 11123	<sup>5</sup> Property Name NORTH VACUUM ABO WEST UNIT	<sup>6</sup> Well No. 15
<sup>7</sup> OGRID Number 022351	<sup>8</sup> Operator Name TEXACO EXPLORATION & PRODUCTION INC.	<sup>9</sup> Elevation 4049' GR

<sup>10</sup> Surface Location									
UI or lot no. D	Section 27	Township 17S	Range 34E	Lot.Idn	Feet From The 660	North/South Line NORTH	Feet From The 660	East/West Line WEST	County LEA

<sup>11</sup> Bottom Hole Location If Different From Surface									
UI or lot no. N/H	Section 22/28	Township 17S	Range 34E	Lot.Idn	Feet From The 809/2061	North/South Line S/N	Feet From The 2017/767	East/West Line W/E	County LEA

<sup>12</sup> Dedicated Acres 200	<sup>13</sup> Joint or Infill No	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



<sup>17</sup> OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief  Signature <i>Monte C. Duncan</i> Printed Name Monte C. Duncan Position Engr Asst Date 7/23/97
<sup>18</sup> SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief. Date Surveyed  Signature & Seal of Professional Surveyor  Certificate No.

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OIL CONSERVATION DIVISION  
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WELL FILE

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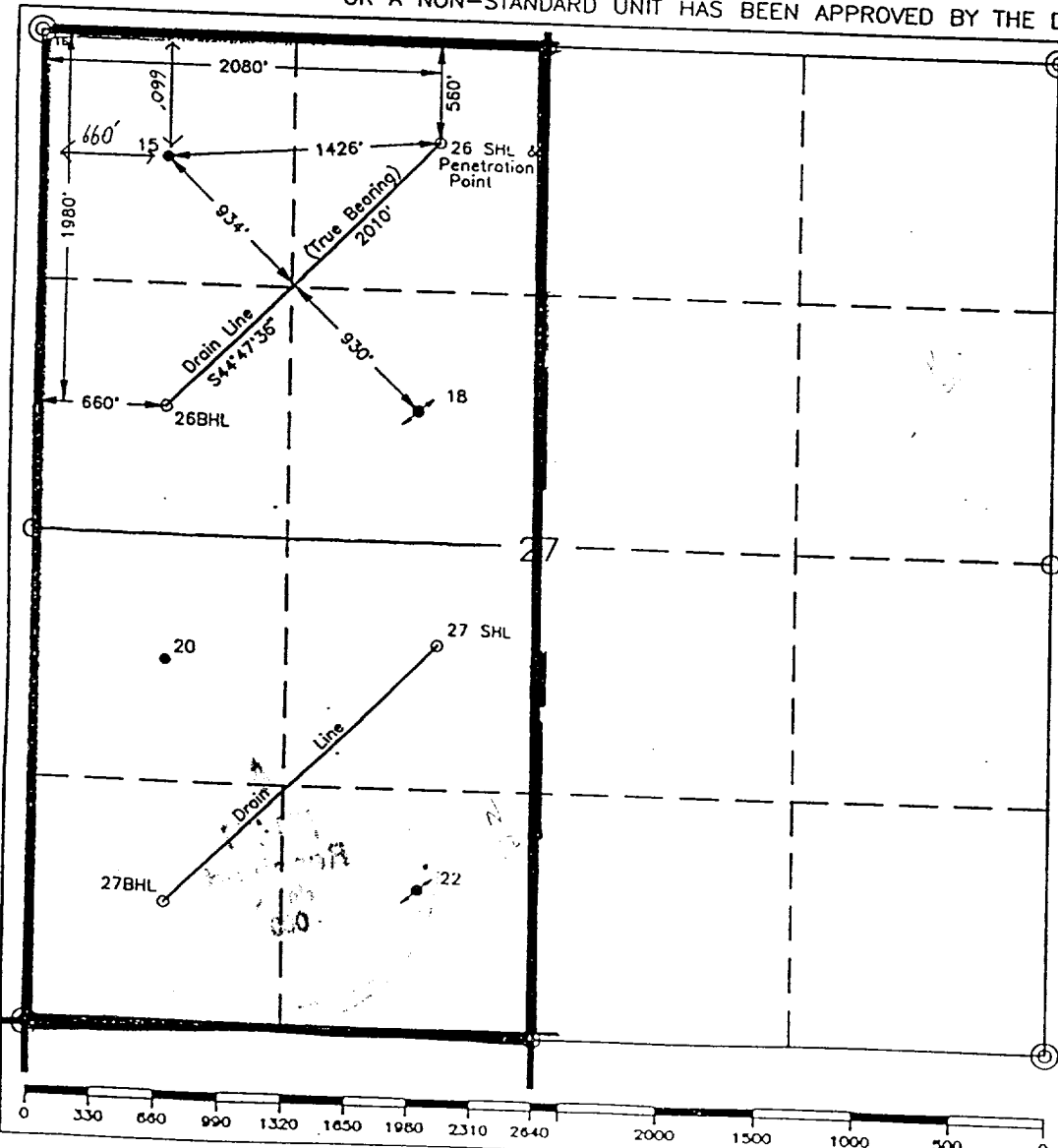
State Lease-4 copies  
Fee Lease-3 copies

WELL LOCATION AND ACREAGE DEDICATION PLAT

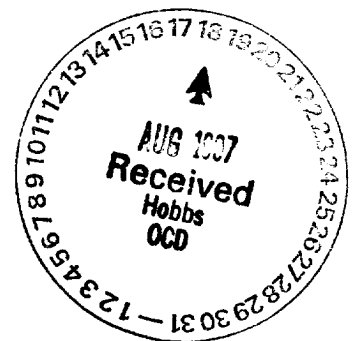
☒ AMENDED REPORT

<sup>1</sup> API Number 30-025-23905		<sup>2</sup> Pool Code 61760		<sup>3</sup> Pool Name Vacuum Abo, North			
<sup>4</sup> Property Code 11123		<sup>5</sup> Property Name North Vacuum Abo West Unit					
<sup>6</sup> GRID No. 22351		<sup>7</sup> Operator Name TEXACO EXPLORATION & PRODUCTION, INC.					
				<sup>8</sup> Well Number 15			
				<sup>9</sup> Elevation 4049' GR			
<sup>10</sup> Surface Location							
UL or lot no. D	Section 27	Township 17-S	Range 34-E	Lot Idn 660	Feet from the North/South line North 660	Feet from the East/West line West 660	County Lea
<sup>11</sup> Bottom Hole Location If Different From Surface							
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the North/South line	Feet from the East/West line	County
<sup>12</sup> Dedicated Acres 160		<sup>13</sup> Joint or Infill		<sup>14</sup> Consolidation Code		<sup>15</sup> Order No. Administrative Order DD-153(H)	

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION.



<sup>16</sup> OPERATOR CERTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
Signature	<i>Monte C. Duncan</i>
Printed Name	Monte C. Duncan
Position	Engineer's Assistant
Company	Texaco Expl. & Prod. Inc.
Date	3/20/97
<sup>17</sup> SURVEYOR CERTIFICATION	
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.	
Date Surveyed	
Signature & Seal of Professional Surveyor	
Certificate No.	
Sheet	



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## OIL CONSERVATION DIVISION

P.O. Box 2088  
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WELL API NO.	30-025-23905
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B-143-3
7. Lease Name or Unit Agreement Name	North Vacuum Abo West Unit
8. Well No.	15
9. Pool name or Wildcat	Vacuum Abo North

SUNDRY NOTICES AND REPORTS ON WELLS (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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Texaco Exploration and Production Inc.	
3. Address of Operator P.O. Box 730 Hobbs, New Mexico 88240	
4. Well Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>27</u> Township <u>17S</u> Range <u>34E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4049' GR	

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 OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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. 10/21/91 - 11/04/91

1. MIRU. TOH w/production equipment. Starting date 10-21-91
2. Perforated 5 1/2" csg w/12 JSPF @ 8741-45, 2 JSPF @ 8674', 8684', & 8692'.  
(8 int. 66 holes)
3. TIH w/pkr to 8790', spotted 100 gal 15% HCL NEFE from 8790'-8717', set pkr @ 8491',
4. Acidized perms 8674'-8780' w/3000 gal 15% NEFE & 80 1.3 ball sealers, max press 2677#, min press 0, AIR 6.3 BPM, ISIP 2050#, 3 min. vac, TL 160 bbl.
5. Fracture perms 8674'-8780' w/300 bbl 40 LB. X Link gel, max press 5458#, min press 1700#, AIR 23.3 bbl, ISIP 3750#, cal closure.
6. Fracture perms 8674'-8780' w/83500 gal. X Link gel & 157640 20/40 sand, max press 8400# sand out, min press 5800#, AIR 25 BPM, ISIP 8400#, TL 1802 bbl, flow back 15 bbl, shut-in.
7. Open valve, 0 PSI, TIH w/sinker bar, tagged sand @ 5300'
8. TIH w/bit, washed sand 5775'-8478', released pkr and TOH w/tbg
9. TIH w/bull dog bailer, clean out from 8478' to 8491'. (CONTINUED ON BACK)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE M.C. Duncan TITLE Engineer's Assistant DATE 11-18-91  
TYPE OR PRINT NAME M.C. Duncan TELEPHONE NO. 393-7191

(This space for State Use)

Orig. Signed by  
Paul Kautz  
Geologist

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

10. TOH w/bailer, TIH w/bit, clean out to TD (8800'), TOH w/bit.
11. TIH w/prod equipment, placed well back on production. Completion date 11-04-91.

PRIOR TEST 18 Oil, 0 water, 10 mcf  
AFTER TEST 47 Oil, 39 water, 31 mcf

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WELL API NO. 30-025-23905
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-143-3
7. Lease Name or Unit Agreement Name North Vacuum Abo West Unit
8. Well No. 15
9. Pool name or Wildcat Vacuum Abo North

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Texaco Exploration and Production Inc.
3. Address of Operator P.O. Box 730 Hobbs, New Mexico 88240
4. Well Location

Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line

Section 27 Township 17S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
4049' GR

1. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
WILL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

2. 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.

- 1). MIRU PU. TOH w/rods and pump. Install BOP. TOH w/tbg.
- 2). Perforate 5 1/2" csg w/2 JSPF at 8674', 84', and 92'.
- 2). RIH w/5 1/2" pkr on 3 1/2" workstring to 8800'. Spot 100 gals 15% HCL NEFE from 8707'-8780'. Load tbq w/24 Bbls fresh water. POH and set pkr at 8500'. Load backside w/fresh water.
- 3). Acidized perms from 8707'-8780' w/2900 gals (69 Bbls) 15% HCL NEFE w/46 ball sealers. Flush to bottom perf w/2% KCL water. Swab back load.

(CONTINUED ON BACK)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE M.C. Duncan TITLE Engineer's Assistant DATE 9-20-91

TYPE OR PRINT NAME M.C. Duncan TELEPHONE NO. 393-7191

This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

- 4). Fracture perf's from 8707'-8780' w/BJ Titans Ultra Frac RII-4 +  
5% diesel and 212000 lbs 20/40# Santrol Super DC sand at 25 BPM  
(max surface treating pressure (6500 PSI) as follows:
- a). Pump 40,000 gals pad.
  - b). Pump 1,000 gals w/2 ppq 20/40 Santrol Super DC sand.
  - c). Pump 2,000 gals w/3 ppq 20/40 Santrol super DC sand.
  - d). Pump 3,000 gals w/4 ppq 20/40 Santrol super DC sand.
  - e). Pump 4,000 gals w/5 ppq 20/40 Santrol super DC sand.
  - f). Pump 6,000 gals w/6 ppq 20/40 Santrol super DC sand.
  - g). Pump 8,000 gals w/7 ppq 20/40 Santrol super DC sand.
  - h). Pump 10,000 gals w/8 ppq 20/40 Santrol super DC sand.
  - i). Flush w/76 Bbls to top perf.
- 5). Flow back well immediately upon SI at 10 gals/min (1/4 Bbls/min)  
and monitor pressure versus time. Flow back until a change of  
slope occurs. SI 24 hours.
- 6). Swab back load.
- 7). Release pkr and POH w/tbg. RIH w/4 3/4" bit and bailer on work-  
string and clean out to 4800'. TOH w/tbg.
- 8). Run production equipment, test well, and return to production.

SEP 24 1960

CC:  
HEADS OFFICE