

OIL CONSERVATION DIVISION

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

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

WELL API NO.	3002528145
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	543950
7. Lease Name or Unit Agreement Name	NEW MEXICO -AT- STATE
8. Well No.	10
9. Pool Name or Wildcat	SAUNDERS PERMO UPPER PENN
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	4212 GR

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 GAS WELL OTHER WATER INJECTION

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

4. Well Location
Unit Letter K : 1650 Feet From The SOUTH Line and 2305 Feet From The WEST Line
Section 15 Township 14S Range 33E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT,GR, etc.) 4212 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: CASING INTEGRITY TEST FOR TA STATUS <input checked="" type="checkbox"/>	

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.

9/1/94 - 9/2/94

- MIRU RAM. RELEASE PACKER AND TOH.
- SET CIBP @ 9712 CAPPED WITH 35' OF CMT, PBDT 9677
- CIRCD HOLE WITH INHIBITED FLUID & TSTD AS PER NMOCD GUIDELINES TO 500# FOR 30 MIN., HELD OK
- TOH W/ TBG. REQUEST TEMPORARILY ABANDON STATUS THROUGH 9/2/99.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

This Approval of Temporary Abandonment Expires 9-8-99

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

SIGNATURE Richard DeSoto TITLE Engineering Assistant DATE 9-7-94

TYPE OR PRINT NAME Richard B. DeSoto Telephone No. 397-0416

ORIGINAL SIGNED BY GARY WINK
(This space for State Use)

APPROVED BY FIELD REP. II TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____