

District I - (505) 393-6161  
1625 N. French Dr  
Hobbs, NM 88241-1980  
District II - (505) 748-1283  
811 S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Road  
Aztec, NM 87410  
District IV - (505) 827-7131

New Mexico  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-140  
Revised 06/99

SUBMIT ORIGINAL  
PLUS 2 COPIES  
TO APPROPRIATE  
DISTRICT OFFICE

APPLICATION FOR  
WELL WORKOVER PROJECT

I. Operator and Well

17-0644

Operator name & address TEXACO EXPLORATION & PRODUCTION INC. PO BOX 3109 MIDLAND, TEXAS 79702							OGRID Number 022351	
Contact Party BOBBY MCCURRY							Phone 505-396-4414 EXT-103	
Property Name WEST VACUUM UNIT					Well Number 43		API Number 3002502278	
UL D	Section 3	Township 18S	Range 34E	Feet From The 330	North/South Line North	Feet From The 990	East/West Line West	County LEA

II. Workover

Date Workover Commenced: 09/23/99	Previous Producing Pool(s) (Prior to Workover):  VACUUM GRAYBURG SAN ANDRES
Date Workover Completed: 10/17/99	

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

State of New Mexico )  
 ) ss.

County of Lea )

Denise Wann, being first duly sworn, upon oath states:

1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature Denise Wann Title Acting Senior Engineer Date 12-6-00  
SUBSCRIBED AND SWORN TO before me this 6th day of December, 2000.

John Ayers  
Notary Public

My Commission expires: 2-29-04

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on \_\_\_\_\_.

Signature District Supervisor	OCD District	Date
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: \_\_\_\_\_

Submit 3 copies  
to Appropriate  
District Office

State of New Mexico  
Geology, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.	3002502278
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	858150
7. Lease Name or Unit Agreement Name	WEST VACUUM UNIT
8. Well No.	43
9. Pool Name or Wildcat	VACUUM GRAYBURG SAN ANDRES

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 ☐

2. Name of Operator  
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator  
205 E. Bender, HOBBS, NM 88240

4. Well Location

Unit Letter D : 330 Feet From The NORTH Line and 990 Feet From The WEST Line

Section 3 Township 18S Range 34E NMPM LEA COUNTY

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

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: ☒ C/O, ACIDIZE, SCALE SQUEEZE

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.

9-23-99: MIRU. PMP STUCK W/PARAFFIN.

9-24-99: HOT WTR CSG. NUBOP.

9-27-99: TIH W/BIT & BAILER. TEST TBG. C/O 4705-4756 ON METAL.

9-28-99: TIH W/PKR. ATTEMPT TO SET @ 4150'. WILL NOT SET. TIH W/PKR. SET @ 4143'. LOAD & TEST CSG TO 300 PSI-OK.

9-29-99: ACIDIZE W/6000 GALS 15% NEFE & 3050 LBS RL SKT. SWAB WELL.

9-30-99: SCALE SQUEEZE.

10-01-99: REL PKR. RETURN WELL TO PRODUCTION.

10-17-99: ON 24 HR OPT. PUMPED 15 BO, 35 BW, & 1 MCF.

FINAL REPORT

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant

DATE 11/04/1999

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature]

DATE NOV 10 1999

CONDITIONS OF APPROVAL, IF ANY: [Signature]

