

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. 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. 30-025-2Y322
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-3011-1
7. Lease Name or Unit Agreement Name Vacuum Grayburg San Andres
8. Well No. 29
9. Pool name or Wildcat Vacuum Grayburg San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4024' DF

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 ☐ GAS WELL ☐ OTHER Injection
2. Name of Operator Texaco Producing Inc.
3. Address of Operator P.O. Box 730, Hobbs, NM 88240
4. Well Location Unit Letter E : 2630 Feet From The North Line and 1310 Feet From The West Line Section 2 Township 18S Range 34E NMPM Lea County

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.

11-13-90 - 11-20-90

- 1) MIRU PU. NU BOP. TOH w/inj equip.
- 2) TIH w/bit & WS to 4500'. C/O to TD 4746'.
- 3) Spot 300 gals 440 NA Perborate across perms 4528-4713'. TOH.
- 4) Set pkr @ 4025'. A/perfs 4528-4713' w/6600 gals 15% NEFE, 1600 lbs RS, 100 BS's. Max P-3000#, Min P-1800#, AIR 4 BPM, ISIP-1900#, 15 min-1600#. TOH.
- 5) TIH w/AD-1. Cir pkr fld. Set @ 4364'. Test O.K.
- 6) Returned to injection.

Prior - 183 BW @ 1300 psi. After - 307 BW @ 1250 psi.

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

SIGNATURE Richard DeSoto TITLE Engineering Technician DATE 12/07/90
TYPE OR PRINT NAME R. B. DeSoto TELEPHONE NO. 393-7191

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: