

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL APT NO.

30-025-04002

5. Indicate Type of Lease

STATE FEE

6. State Oil & Gas Lease No.

B1327

7. Lease Name or Unit Agreement Name

Monstate

8. Well No.

4

9. Pool name or Wildcat

Eumont Yates 7 Rivers Queen

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

2. Name of Operator

Texaco Producing Inc.

3. Address of Operator

P.O. Box 730, Hobbs, NM 88240

4. Well Location

Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line

Section 13 Township 19S Range 36E NMPM Lea County

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

3726' 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 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.

- MIRU. Killed well. TOH w/tbg.
- Ran bit & bailer. C/O to 3750'.
- TIH w/5-1/2" pkr. PSA 3512'. Tstd csg to 600#. OK.
- A/w/3000 gals 15% NEFE. Max P-570#. AIR 8 BPM.
- F/OH 3580-3750' w/46,000 gals gelled wtr & CO₂ & 130,000# 12/20 sd. Max P-4170#. AIR 30 BPM.
- TOH w/WS. C/O to 3750'.
- Ran tbg, rods & pmp. SN @ 3683'.
- OPT 06-05-90, 0 BO, 0 BW, 700 MCFD.

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

SIGNATURE L. D. Ridenour TITLE Engineer's Assistant DATE 06-15-90

TYPE OR PRINT NAME L. D. Ridenour TELEPHONE NO. 393-7191

(This space for State Use)

ORIGINAL SIGNED BY JERRY GENTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 18 1990

CONDITIONS OF APPROVAL, IF ANY: