

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.	30-025-32687
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-1327
7. Lease Name or Unit Agreement Name	SKELLY "B" STATE COM
8. Well No.	4
9. Pool Name or Wildcat	EUMONT YATES SEVEN RIVERS (PRO GAS)
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	GR-3594', KB-3607'

**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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator 205 E. Bender, HOBBS, NM 88240	4. Well Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>1800</u> Feet From The <u>WEST</u> Line Section <u>16</u> Township <u>21-S</u> Range <u>36-E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3594', KB-3607'	

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 OPERATION ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☒ ACIDIZE

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.

2/26/97 MIRU DS COIL TUBING UNIT W/ PERF CLEAN TOOL. ACIDIZE EUMONT PERFS W/ 2500 GALS. 15% HCL AND 130,000 SCF N2 THROUGH

COIL TUBING. CASING VALVE LEFT OPEN THROUGHOUT THE JOB. PREP TO RE-ACIDIZE.

2/27/97 ACIDIZE W/ 2500 GALLONS 15% HCL AND 130,000 SCF N2. JET HOLE DRY W/ N2. PLACE WELL BACK ON PRODUCTION.

2/27/97 TO 3/7/97 TEST. 0 BOPD, 0 BWPD, 464 MCFPD. OPT.

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

SIGNATURE V. Greg Maes TITLE Engineering Assistant DATE 3/24/97  
TYPE OR PRINT NAME V. Greg Maes Telephone No. 397-0431

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE  DATE MAR 27 1997

CONDITIONS OF APPROVAL, IF ANY: