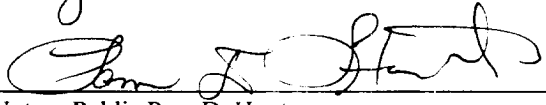




SUBSCRIBED AND SWORN TO before me this 12<sup>th</sup> day of June, 1997.

  
Notary Public Pam D. Hunt

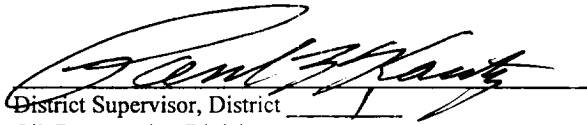
My Commission expires: 9/13/97

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FOR OIL CONSERVATION DIVISION USE ONLY:

VIII. CERTIFICATION OF APPROVAL:

This Application for Qualification of a Production Restoration Project is hereby approved and the above referenced Well is designated as a Production Restoration Project pursuant to the "Natural Gas and Crude Oil Production Incentive Act" (Laws 1995, Chapter 15, Sections 1 through 8). By copy of this Application and Certification of Approval, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that production was restored in this Production Restoration Project on: 11-7-96, 19    .

  
District Supervisor, District       
Oil Conservation Division

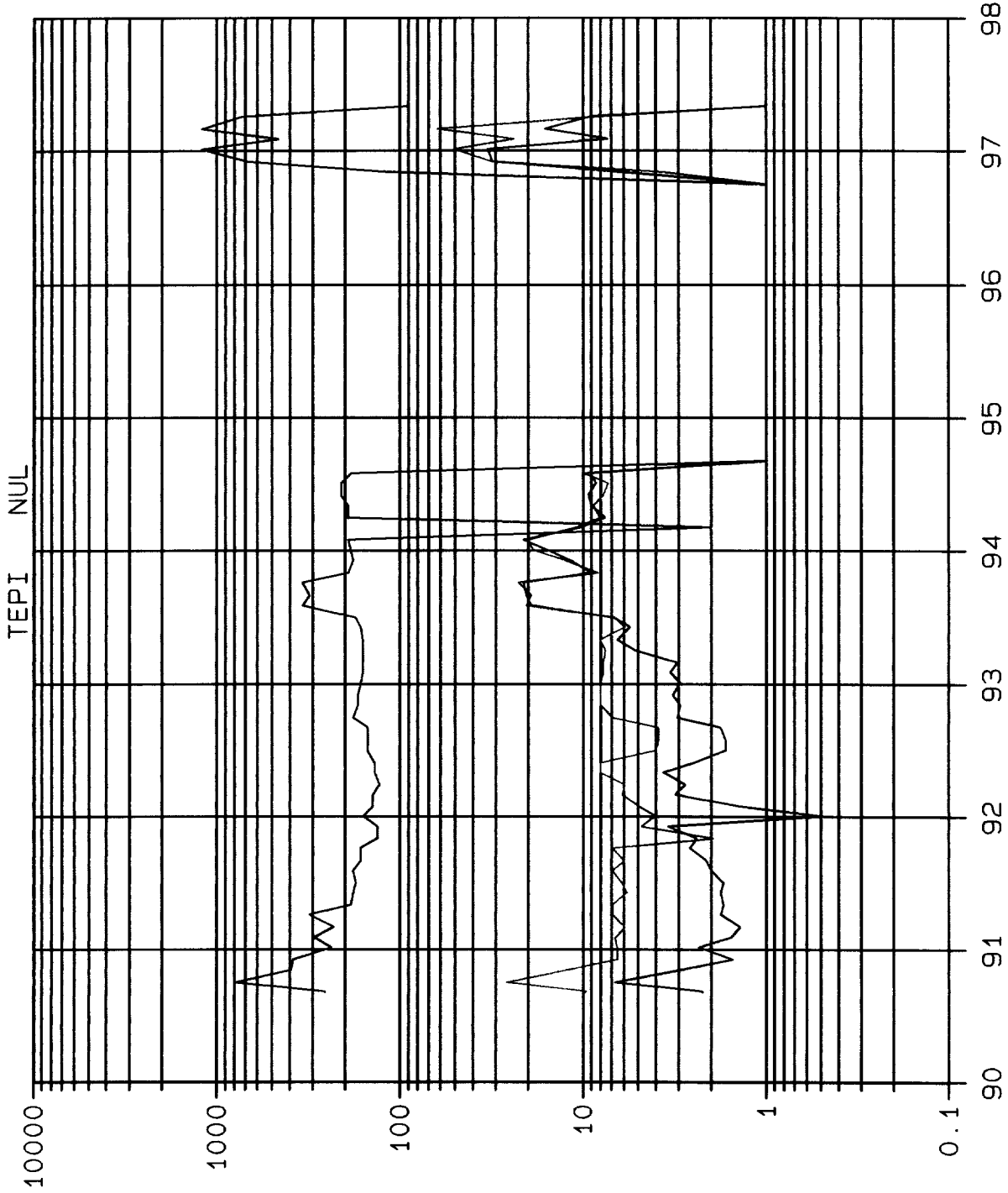
Date: 6/19/97

IX. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT.  
DATE: \_\_\_\_\_



VACUUM GRAYBURG SAN ANDRES UT 157 VACUUM GRAYBURG SAN ANDRES

LEASE DATA  
 LSE 011124  
 FLD 62180  
 OPER TEPI  
 ZONE NUL  
 --  
 COUNTY 025  
 STATE 30  
 30025307170001  
 STATUS 4-97  
 CO 18 MBO  
 CG 11 MCMF  
 CW 434 MBW  
 BOPD 1  
 BWPD 90  
 MCFPD 0  
 WELLS 1  
 CI 0 MBWI  
 BWIPD 0



YEARS

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. 30-025-30717
5. Indicate Type of Lease STATE [X] FEE [ ]
6. State Oil / Gas Lease No. B - 1080

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 [X] 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 C : 710 Feet From The NORTH Line and 2530 Feet From The WEST Line
Section 1 Township 18S Range 34E NMPM LEA COUNTY

7. Lease Name or Unit Agreement Name VACUUM GRAYBURG SAN ANDRES UT

8. Well No. 157

9. Pool Name or Wildcat VACUUM GRAYBURG SAN ANDRES

10. Elevation (Show whether DF, RKB, RT,GR, etc.) GR-3993'

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: FRACTURE TREATMENT [X]

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.

The notice of intent dated 10/8/96 to perform this workover was approved by the NMOCD on 10/11/96.
10/14/96 - 10/26/96
1. MIRU pulling unit & reverse unit. Installed BOP. TIH w/ 6-1/8" bit, drill out CIBP @ 4070', pushed CIBP to 4962'. (PBTD @ 4990').
2. Circd hole clean. Sptd 12,900# sand from 4962'-4400'. Tagged sand @ 4412'.
3. TIH w/ 7" treating packer and 3-1/2", 9.3# frac tubing. Set pkr @ 4084', loaded backside & tested to 700#, OK.
4. Fracture treated perms from 4291' - 4348' w/ 41,000 gallons 40# YF-40 Gel, 1200# adamite regaine, 98,000# 20/40 Ottawa sand & 57,000# 20/40 curable resin coated sand. Max P = 8900#, AIR = 35 BPM.
5. Flowed back 1 hour. SI for 24 hours to set sand.
6. Rigged up coiled tbg unit, tagged sand @ 3710'. Cleaned out to 4160'. TOH w/ coiled tbg unit. Flowed well back.
7. Released & TOH w/ packer & frac tubing. TIH w/ bit, tagged up @ 4340', C/O to 4945', circd hole clean.
8. TIH w/ production equipment & returned well to production.
OPT 11/7/96 PUMPING BY ROD PUMP: 24 BOPD, 600 BWPD, 26 MCFD
(INTERNAL TEPI STATUS FROM TR-O TO PM)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE [Signature] TITLE Engr Asst DATE 1/17/97
TYPE OR PRINT NAME Monte C. Duncan Telephone No. 397-0418

APPROVED BY [Signature] TITLE DATE JAN 22 1997
CONDITIONS OF APPROVAL, IF ANY: