

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 API NO.
30-025-32224

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name

G. W. SIMS

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.

2

2. Name of Operator
TEXACO EXPLORATION AND PRODUCTION INC.

9. Pool name or Wildcat

SW TEAGUE, GLORIETA\UP.PADDOCK

3. Address of Operator
P. O. Box 3109 Midland, Texas 79702

4. Well Location

Unit Letter B : 510 Feet From The NORTH Line and 2080 Feet From The EAST Line

Section 9 Township 23-SOUTH Range 37-EAST NMPM LEA County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)
GR-3309'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <u>EXTEND DRILLING PERMIT</u> <input checked="" type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

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.

DUE TO DRILLING PRIORITY, THIS WELL WILL NOT BE SPUDDED BEFORE THE SEPTEMBER 10, 1994 EXPIRATION DATE. PLEASE EXTEND THIS PERMIT AN ADDITIONAL SIX MONTHS.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE C.P. Basham / CWA TITLE DRILLING OPERATIONS MANAGER DATE 02-08-94
TYPE OR PRINT NAME C. P. BASHAM TELEPHONE NO. 915-6884620

(This space for State Use)
APPROVED BY _____ TITLE _____ DATE AUG 10 1994
CONDITIONS OF APPROVAL, IF ANY:
Expires February 10th 1995