

2/51

5. LEASE DESIGNATION AND SERIAL NO.
NM-56220

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
'DD' FEDERAL -24-

9. WELL NO.
3

10. FIELD AND POOL, OR WILDCAT
DAGGER DRAW UP.PENN.N.

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 24, T-19-S, R-24-E

12. COUNTY OR PARISH
EDDY

13. STATE
NM

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-" for such proposals.)

RECEIVED
JUN 22 1993
O.C.D.
ARTES. AREA OFFICE & PHONE NO.
(915) 688-4620

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
TEXACO EXPLORATION AND PRODUCTION INC.

3. ADDRESS OF OPERATOR
P. O. Box 3109, Midland, TX 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FSL & 1650' FEL, UNIT LETTER O.

14. PERMIT NO.
API: 30 015 27212

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
GR-3588', KB-3602'

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

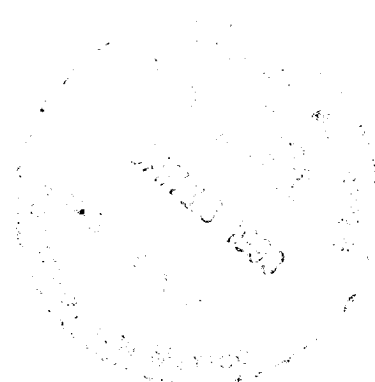
WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) **COMPLETION**

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

- MIRU COMPLETION UNIT. CLEAN OUT CEMENT TO PBTD OF 7957'. TESTED CASING TO 3000# FOR 30 MINUTES 01-03-93.
- HALLIBURTON RAN GR-CCL. PERFED w/ 2 JSPF: 7662-7734, 7752-7806. 252 HOLES.
- DOWELL ACIDIZED WITH 5000 GAL 15% HCL. ACID-FRAC WITH 35000 GAL 20% HCL WITH 3750# ROCK SALT. JOB COMPLETE 01-05-93.
- TIH WITH 2 7/8 TUBING, PUMP AND RODS. SEATING NIPPLE @ 7870'.
- PUMPED 24 HOURS 01-10-92. RECOVERED 20 BO, 570 MCFPD, 534 BLW.
- TESTING.



18. I hereby certify that the foregoing is true and correct

SIGNED S.P. Bashan/cwb TITLE DRILLING OPERATIONS MANAGER DATE 01-11-93

(This space for Federal or State office use)
APPROVED BY [Signature] TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

JUL 19 1993
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side