

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.

30-015-31335

5. Indicate Type of Lease

STATE ☒

FEE

6. State Oil / Gas Lease No.

7. Lease Name or Unit Agreement Name

REMUDA BASIN STATE

8. Well No.

5

9. Pool Name or Wildcat

NASH DRAW DELAWARE

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO
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 EXPLORATION & PRODUCTION INC.

3. Address of Operator

205 E. Bender, HOBBS, NM 88240

4. Well Location

Unit Letter D 330 Feet From The NORTH Line and 990 Feet From The WEST Line
Section 19 Township 23-S Range 30-E NMPM EDDY COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3025'

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

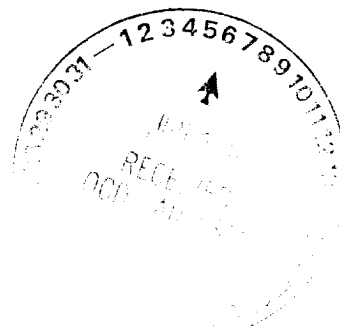
CASING TEST AND CEMENT JOB

OTHER:

INTERMEDIATE CASING ☒

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.

1-03-01/1-11-01: DRLG 3184-3213,3355. CIRC TO RUN 8 5/8" CSG. RAN 72 JTS 8 5/8" 32# LTC CSG 3359'. CIRC 8 5/8" CSG. CMT 8 5/8" CSG. CIRC 164 SX EXCESS CMT TO PIT. PLUG DOWN 0630 1-04-01. WOC 8 HFS. NDBOP. SET 8 5/8" CSG SLIPS W/73K POUNDS ON SLIPS. INSTL 8 SECTION. TEST FLANGE TO 2000 PSI FOR 15 MIN-OK. HU FLOW LINE. DRLG 3355-3679. SURVEY @ 3639' MISSRUN. DRLG 3639-3710,4200,4707, 5210,5424,5775,6075,6276,6743,6773,6780,7021,7160,7178,7196,7250. TD 7 7/8" HLE @ 2345 1-10-01. LOGGING WELL W/PLATFORM EXPRESS 1-10-01. LOGGERS TD @ 7250.



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

SIGNATURE

J. Denise Leake

TITLE Engineering Assistant

DATE 1/12/01

TYPE OR PRINT NAME

J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

APPROVED

SW

**ORIGINAL SIGNED BY: J. DENISE LEAKE
DISTRICT II SUPERVISOR**

CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE

JUL 05 2001