

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons.
N.M. Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210
FORM APPROVED
Bureau No. 1004-0135
Expires: March 31, 1993

clsk

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT --" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: ☒ OIL WELL ☐ GAS WELL ☐ OTHER
2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.
3. Address and Telephone No. 15 SMITH ROAD, MIDLAND, TX 79705 915-687-737
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter A : 950' Feet From The NORTH Line and 660' Feet From The
EAST Line Section 19 Township 23-S Range 30-E

5. Lease Designation and Serial No.
NM-17056
6. If Indian, Alottee or Tribe Name
7. If Unit or CA, Agreement Designation
8. Well Name and Number
REMUDA BASIN '19' FEDERAL
4
9. API Well No.
30-015-32225
10. Field and Pool, Exploratory Area
BRUSHY CANYON, DELAWARE
11. County or Parish, State
EDDY, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input checked="" type="checkbox"/> Altering Casing
	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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.)

TEXACO INTENDS TO ALTER THE CASING PROGRAM IF NECESSARY, TO CONTROL WATER FLOWS.

16" 440' 65# H-40 580 SX CEMENT OK FOR CIRCULATION w/ 20" HOLE
11 3/4" 3350' 42# H-40 1280 SX CEMENT
8 5/8" 4650' 32# J-55 1160 SX CEMENT
5 1/2" 7420' 17# J-55, L-80 1130 SX CEMENT

3350' of 11-3/4", 42#, H-40, LTC csg:
Collapse Load = 1740 psi
Collapse Strgth = 1070 psi

1070/1740 = 0.615 (1.125 Min) - S.F. for Collapse exceeded
with 8.4 ppg mud

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

SIGNATURE *J. Denise Leake* TITLE Regulatory Specialist

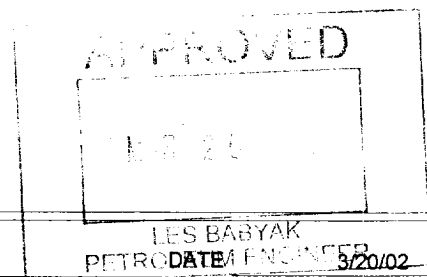
TYPE OR PRINT NAME J. Denise Leake

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL IF ANY: _____ TITLE _____ DATE _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



RECEIVED
MAR 21 2002
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