

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.	30-025-34723
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	TEXMACK 5 STATE COM
8. Well No.	1
9. Pool Name or Wildcat	WILDCAT MORROW
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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 PERMI (FORM C-101) FOR SUCH PROPOSALS.	
1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER NEW WELL
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter <u>R</u> : <u>1980</u> Feet From The <u>SOUTH</u> Line and <u>1500</u> Feet From The <u>EAST</u> Line Section <u>5</u> Township <u>16-S</u> Range <u>32-E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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: ☒ SPUD REPORT & SURFACE CSG

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.

1-20-00/1-29-00: SPUD 1-21-00. DRLG TO 250', 538. RUN 12 JTS 11 3/4" 42# H-40 CSG SET @ 538'. CMT W/100 SX LEAD & 250 SX TAIL. FULL RETURNS 19 SX TO SURF. WOC 3.5 HRS. CUT & WELD 11 3/4X13 5/8" HEAD. TEST TO 500 PSI. NUBOP. TEST TO 500 PSI. TIH W/DC. DRILL CMT & SHOE. DRLG FR 538-1051, 1081, 1548, 2016, 2470, 2515, 2837, 2960, 2986, 3271, 3285, 3605, 3770, 3910, 4220, 4500 TD 11" HLE @ 5:45 AM 1/29/00.

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 1/30/00
TYPE OR PRINT NAME J. Denise Leake Telephone No. 397-0405

(This space for State Use)

APPROVED _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____