

Exhibit A (Opponents)

**Proposed Drilling  
M-112 (1-1-85)**

### DRILLING PROPOSAL

DATE: August 2, 1985

EST. NO. 5-5845

LAND DEPT.

**LEASE NO.**

LEASE NAME & NO.: FORTY-NINER RIDGE DELAWARE  
FORTY-NINER RIDGE

FIELD: DELAWARE

PSH. OR CNTY.: EDDY

**STATE:** N. M.

DISTRICT: HOBBS

**AREA:** EUNICE

2516 FNC 2516' TEL

1.000 1.000 1.000 1.000 1.000

## OBJECTIVE HORIZON: Shorter, Longer

CH x CAS DEPTL 64801

#### WELL COST DETAIL

## WELL AND LEASE EQUIPMENT

				MOH	DRY HOLE	COMPLETION	TOTAL
Well Head & Misc. Equip.	13-3/8" x						
8-5/8" x 5-1/2" x 2-3/8"	3000 psi W.P.				\$		14,000
400	13-3/8"	54.5	# K-55, STCCasing	x	\$		5,000
2200	8-5/8"	24	# K-55, STCCasing	x	\$		19,000
1000	8-5/8"	28	# S-80, STCCasing	x	\$		9,000
6400	5-1/2"	15.5	# K-55, LTCCasing	x	\$		32,000
	"		# Casing		\$		
	"		# Casing		\$		
6300	2-3/8"	4.7	# J-55, EUETubing	x	\$		11,000
	"		# Tubing		\$		
	"		# Flow or Inj Line		\$		
<hr/>					\$		
TOTAL TANGIBLES					\$		90,000

## INTANGIBLE DRILLING COSTS

760 - Transportation & Tugs	\$		17,000
761 - Roads, Dirt Work, Bits	\$		10,000
762/763 - Cont Drlg <u>15</u> Days @ \$4500	\$		68,000
Mobilization	\$		
764 - Cont Compl Unit <u>7</u> Days @ \$1500	\$		11,000
765 - Bits, Rmrs, Stab & Mtrs	\$		11,000
767 - TX. Sal. Non Rig	X	\$	4,000
769 - Drill Pipe Rental	\$		
770 - Directional Tools & Serv.	\$		
771 - Fishing Tools & Service	\$		
772 - Other Rental & Equipment	\$		7,000
773 - Drlg Mud, Additives & Service	\$		6,000
774 - Cement & Cementing Services	\$		30,000
775 - Water	\$		11,000
776 - Fuel	\$		
777 - Coring	\$		
778 - Testing	\$		8,000
779 - Perforating	\$		4,000
780 - Stimulation	\$		10,000
781 - Electric Logging & Surveys	\$		16,000
782 - Waste Disposal/Mud, Chemicals, Etc.	\$		3,000
783 - Damages	\$		2,000
788 - Marine Dredging or Shell Mat	\$		
789 - Other Drilling Costs	\$		
793 - Pollution Control - Other	\$		32,000
 	\$		
 	\$		
TOTAL INTANGIBLES	\$		250,000
 	\$		
TOTAL COST OF WELL	\$		340,000

<u>Approval</u>	<u>Date</u>
Petr. Engr. <u>Z. J. Lienar</u>	<u>1/26/85</u>
Dist. Drdg. Mar. <u>H. H. Bahr</u>	<u>1/26/85</u>
Dist. Mar. <u>J. S. King</u>	
Drdg. Mar.	<u>1/26/85</u>

	Gross	Texaco Int.	MOH	Texaco Int.
W&L S				
IDC				
Totals				

Days to Drill 15 Days to Complete 7

$\text{E}(\text{PCC}) = \rho = 0.6 = 0.6^2 = 0.36 = 36\%$

Opposite H

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## LEASE

This Indenture of Lease, entered into in duplicate this 29<sup>th</sup> day of November, 1945, by and between United States Potash Company (No Stockholders' Liability), a corporation organized and existing under the laws of the State of New Mexico, hereinafter called the Lessor, and International Minerals & Chemical Corporation, a corporation organized and existing under the laws of the State of New York, hereinafter called the Lessee, WITNESSETH:

Section 1. WHEREAS, Lessor is the lessee of a Potash Mining Lease, being Lease No. M-651, issued to it by the State of New Mexico under date of December 14, 1938, pursuant to the terms and provisions of the Laws of New Mexico, covering, among other lands therein described, the  $\frac{1}{4}$  of Section 36, Township 21 South, Range 29 East, Eddy County, New Mexico; and

WHEREAS, the Lessee herein named is desirous of extracting the potash contained in said described quarter section, and Lessor is willing to grant to Lessee a Sublease of said quarter section for that purpose, subject to the approval of said Sublease by the State of New Mexico;

NOW, THEREFORE, in consideration of the premises and of the royalties to be paid and the covenants to be observed as herein set forth, the Lessor does hereby grant, demise, sublease and sublet to the Lessee, exclusively for the sole and only purpose of exploration, development and production of potassium, sodium, phosphorous and other minerals of similar occurrence and their salts and compounds in, upon and under the following described land situate in the County of Eddy, State of New Mexico, more particularly



described as follows, to-wit:

SE $\frac{1}{4}$ , Section 36, Township 21 South, Range 29 East, to the full extent of the right of the Lessor to conduct such exploration, development and production in, upon or under said described lands, pursuant to the terms and provisions of the Potash Mining Lease No. M-651 issued by the State of New Mexico to Lessor under date of December 14, 1936, a copy of which is attached hereto and made a part hereof.

TO HAVE AND TO HOLD said lands and all rights and privileges granted hereunder for a term of one year and as long thereafter, during the continuance of Potash Mining Lease No. M-651, as the said minerals or any of them in paying quantities shall be produced from the said lands.

Section 2. In consideration of the premises, the Lessee hereby agrees as follows, to-wit:

(a) To assume, as between itself and Lessor, and to carry out and fully comply with each and every of the obligations and covenants of lessee, United States Potash Company (No Stockholders' Liability), to the lessor, State of New Mexico, contained in Section 2(e), 2(f), 2(g), 2(h), 2(i), 2(k), 2(l), 2(m) of the Potash Mining Lease No. M-651 issued by the State of New Mexico to United States Potash Company (No Stockholders' Liability), under date of December 14, 1936, a copy of which is attached hereto and made a part hereof.

(b) To assent to and fully abide by and comply with all of the provisions of Sections 3, 4, 5 and 6 of the said Potash Mining Lease No. M-651, issued by the State of New Mexico to United States Potash Company (No Stockholders' Liability), under date of December 14, 1936; and to save

harmless the Lessor against any and all claims or demands of any nature arising out of or in any manner connected with Lessee's operations hereunder.

(c) To pay to the Lessor a royalty of [redacted] per cent of the value of the minerals produced hereunder, except sodium chloride or common salt, such royalty to be computed upon the value of said minerals delivered at the nearest or most accessible railroad shipping point; and to pay to the Lessor a royalty of [redacted] per cent of the actual sale price of all sodium chloride or common salt produced hereunder at the place of extraction; it being understood and agreed that Lessor herein will pay to the State of New Mexico out of said royalty so to be paid by Lessee to Lessor herein, the full amount of the royalty on the minerals produced hereunder required to be paid to said State of New Mexico under the provisions of the Potash Mining Lease No. M-651 between Lessor herein and the State of New Mexico, dated December 14, 1936, a copy of which is annexed hereto and made a part hereof.

(d) To furnish to Lessor herein the statements and maps required to be furnished by Section 2 (f) and 2 (g) of the Potash Mining Lease No. M-651, between Lessor herein and the State of New Mexico, dated December 14, 1936, a copy of which is annexed hereto and made a part hereof, to the lessor named therein; and as between itself and Lessor herein, to carry out and comply with the obligations and covenants of the lessee contained in Sections 2 (i) and 2 (m) of said Potash Mining Lease between Lessor herein and the State of New Mexico, dated December 14, 1936.

(e) Not to assign or sublet the premises covered hereby without the written consent and approval of the Lessor herein.

(f) To pay directly to the State of New Mexico all taxes now or hereafter levied by the State of New Mexico on the production obtained from the lands hereby leased, including the Severance Tax and Emergency School Tax.

(g) To reimburse Lessor for one-half the cost of one test hole to be drilled on the leased lands by Lessor herein.

Section 3. The Lessee hereunder shall produce from the lands leased not less than [REDACTED] tons per year during the life of this Lease; provided that such production shall not require the Lessee to pull the pillars of the mine or do anything to hamper further mining, and all such production shall be credited on the amount required to be produced by the lessee in Potash Mining Lease No. M-651.

Section 4. The Lessee may at any time, by paying to the Lessor all amounts then due the Lessor as provided herein and the further sum of \$10, surrender and cancel this Sublease in so far as the same covers any portion of the land herein leased, and be relieved from further obligations or liabilities hereunder as to the lands surrendered. Provided that all wages or monies due and payable to the workmen employed by the Lessee shall have been paid and that a satisfactory showing is made to the Lessor that all creditors or others having an interest in or lien or claim against the Lessee are fairly and equitably protected, but in no case shall such termination be effective until the Lessee shall have made adequate provision for the preservation of any mines, productive works and permanent improvements on the lands covered hereby; and provided further that this surrender clause and the option herein

reserved to the Lessee shall cease and become absolutely inoperative immediately and concurrently with the institution of any suit in any court of law or equity by the Lessor, Lessee or any assignee to enforce this Sublease or any of its terms, expressed or implied.

Section 5. If the Lessee shall fail to comply with the provisions of this lease or make default in the performance or observance of any of the terms, covenants and stipulations herein, and such default shall continue for thirty days after service of written notice thereof by the Lessor, then the Lessor may and he is hereby expressly authorized to declare a forfeiture and cancellation of this lease. A waiver of any particular cause of forfeiture shall not prevent the cancellation and forfeiture of this lease for any other cause of forfeiture or for the same cause occurring at any other time.

Section 6. During the continuance of this Sublease Lessor herein will not exercise the rights granted to it as Lessee under Section 4 of the Potash Mining Lease No. M-651 between Lessor herein and the State of New Mexico, a copy of which is annexed hereto and made a part hereof.

IN WITNESS WHEREOF, United States Potash Company (No Stockholders' Liability) and International Minerals & Chemical Corporation have signed this instrument the day and year first above written.

UNITED STATES POTASH COMPANY  
(No Stockholders' Liability)

By Frank M. Albrecht

INTERNATIONAL MINERALS & CHEMICAL CORPORATION

Dated 1-21-1946 By J. D. Morgan, V.P.  
John D. Morgan  
Chairman of Pub. Lands  
ATTEST: H. H. Hunt  
Secretary

STATE OF New York )  
COUNTY OF New York ) ss.

On this 13th day of December, 1945, personally appeared Horace M. Albright to me personally known, who being by me duly sworn did say that he is the Vice President of United States Potash Company (No Stockholders' Liability) and that the seal affixed to the foregoing instrument is the corporate seal of said corporation and that said instrument was signed and sealed in behalf of said corporation by authority of its board of directors and said Horace M. Albright acknowledged said instrument to be the free act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in the certificate above written.

Gertrude B. Stiebler  
Notary Public  
NOTARY PUBLIC, Washington County  
Cert. filed in N.Y. Co. No. 384, Reg. No. 222-86  
Commission Expires March 30, 1946

STATE OF Illinois )  
COUNTY OF Cook ) ss.

On this 23rd day of November, 1945, personally appeared J. P. Morgan, Jr., to me personally known, who being by me duly sworn did say that he is the Vice President of International Minerals & Chemical Corporation and that the seal affixed to the foregoing instrument is the corporate seal of said corporation and that said instrument was signed and sealed in behalf of said corporation by authority of its board of directors and said J. P. Morgan, Jr. acknowledged said instrument to be the free act and deed of said corporation.

In WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in the certificate above written.

Rae Bright  
Notary Public.

My Commission Expires Apr. 30, 1946

**POTASH MINING LEASE**  
(Under Act Approved March 12, 1929)

THIS INDENTURE OF LEASE entered into in duplicate this 14th day of December, 1936, by and between the State of New Mexico acting in this behalf by FRANK VESELY, its Commissioner of Public Lands, party of the first part and hereinafter called the lessor, and UNITED STATES POTASH COMPANY (NO STOCKHOLDERS' LIABILITY), a corporation organized and existing under the laws of the State of New Mexico, party of the second part and hereinafter called the lessee, under, pursuant and subject to the terms and provisions of Chapter 140 of the Session Laws of the New Mexico Legislature of 1929 and Chapter 99 of the Session Laws of the New Mexico Legislature of 1923, and hereinafter referred to as the Acts, all of the provisions of said statutes being hereby made a part hereof.

## WITNESSETH:

SECTION 1. THAT WHEREAS the said lessee has filed in the office of the Commissioner of Public Lands its application to surrender leases held by it and numbered M-90, M-196, M-197, M-198, M-208, M-224, M-226, M-227, M-228, M-229½, M-305, M-342 and M-435, and has complied with all the provisions of said leases providing for their surrender; and

WHEREAS, the said lessee has filed in said office an application for a new lease for the exploration, development and production of potassium, sodium, phosphorus and other minerals of similar occurrence and their salts and compounds upon the lands hereinafter described, and has tendered the sum of \$3,167.25 as the first annual rental thereon, together with the sum of \$5.00 application fee as evidenced by official receipt No.....; and

WHEREAS, the said lessee has heretofore explored the lands hereinafter described, by test wells and by the sinking thereon of a shaft at large expense, and has discovered on said land potassium in commercial quantities, and the said lessee has heretofore begun and is now continuing the production on said land of potassium on a commercial basis, and has produced from the lands hereinafter described, and paid royalty on more than forty thousand tons of crude potassium salts in each of the years 1935 and 1936;

NOW, THEREFORE, in consideration of the said above tender, receipt whereof is hereby confessed and acknowledged, and of the rents and royalties to be paid and the covenants to be observed as herein set forth, the lessor does hereby grant, demise, lease and let to the lessee exclusively for the sole and only purpose of exploration, development and production of potassium, sodium, phosphorus and other minerals of similar occurrence and their salts and compounds in, upon and under the following described land situated in the Counties of Eddy and Lea, State of New Mexico, and more particularly described as follows, to-wit:

Subdivision	Sec.	Twp.	Rge.	Acres
PARCEL "A"				
All .....	32	21S	29E	612.72
Lot 1, SE¼SW¼ .....	18	21S	29E	70.36
All .....	32	20S	30E	640.00
N½ .....	29	20S	30E	320.00
N½ .....	30	20S	30E	319.55
SW¼, SW¼NW¼ .....	11	21S	29E	200.00
N½NW¼, SE¼NW¼, NE¼SW¼ .....	13	21S	29E	160.00
NW¼, NW¼NE¼, NE¼NE¼, NW¼SE¼ .....	14	21S	29E	280.00
PARCEL "B"				
S½S½ .....	32	20S	32E	160.00
NE¼SW¼, W½SE½ .....	9	22S	30E	120.00
All .....	4	22S	30E	641.28
N½, SW¼ .....	28	21S	30E	480.00
E½ .....	21	21S	30E	320.00
N½ .....	27	21S	30E	320.00
All except SW¼SW¼ .....	2	22S	30E	601.52
N½S½, SW¼NW¼, SE¼NW¼ .....	32	20S	32E	240.00
PARCEL "C"				
All .....	5	22S	30E	641.12
All .....	8	22S	30E	640.00
N½, W½SW¼, SE¼SW¼ .....	9	22S	30E	440.00
All .....	16	22S	30E	640.00
All .....	17	22S	30E	640.00
PARCEL "D"				
S½NE¼, NE¼NE¼ .....	32	20S	32E	120.00
All .....	36	20S	32E	640.00
All .....	16	20S	33E	640.00
S½S½ .....	17	20S	33E	160.00
W½, S½SE½ .....	18	20S	33E	399.88
W½NE¼ .....	19	20S	33E	80.00
All .....	32	20S	33E	640.00
N½NW¼, SE¼NE¼, E½SE½, SW¼SE¼ .....	31	20S	33E	320.26

Subdivision	Sec.	Twp.	Rgs.	Acres
<b>PARCEL "E"</b>				
All	2	20S	33E	638.04
Lots 3, 4, SW $\frac{1}{4}$ NE $\frac{1}{4}$ , S $\frac{1}{2}$ NW $\frac{1}{4}$ , W $\frac{1}{2}$ SW $\frac{1}{4}$ , SE $\frac{1}{4}$ SW $\frac{1}{4}$ , N $\frac{1}{2}$ SE $\frac{1}{4}$ .	4	20S	33E	400.92
W $\frac{1}{2}$ E $\frac{1}{2}$	30	20S	33E	160.00
<b>PARCEL "E"</b>				
SE $\frac{1}{4}$ SE $\frac{1}{4}$	27	20S	33E	40.00
All	36	20S	33E	640.00
SE $\frac{1}{4}$	12	20S	32E	160.00
All	13	20S	32E	640.00
SW $\frac{1}{4}$	36	19S	33E	160.00
W $\frac{1}{2}$ SE $\frac{1}{4}$ , SE $\frac{1}{4}$ SE $\frac{1}{4}$	36	19S	33E	120.00
<b>PARCEL "F"</b>				
All	2	21S	29E	941.44
All	16	21S	29E	640.00
All	36	21S	29E	637.12
NW $\frac{1}{4}$ NW $\frac{1}{4}$	8	21S	30E	40.00
NE $\frac{1}{4}$ SE $\frac{1}{4}$	20	21S	30E	40.00
<b>PARCEL "G"</b>				
NE $\frac{1}{4}$	19	21S	31E	160.00
NW $\frac{1}{4}$	20	21S	31E	160.00
SW $\frac{1}{4}$ NE $\frac{1}{4}$ , SW $\frac{1}{4}$	17	21S	31E	200.00
All	36	21S	30E	640.00
All	22	21S	30E	640.00
N $\frac{1}{2}$	23	21S	30E	320.00
SE $\frac{1}{4}$ , S $\frac{1}{2}$ SW $\frac{1}{4}$	14	21S	30E	240.00
S $\frac{1}{2}$	13	21S	30E	320.00
S $\frac{1}{2}$ NW $\frac{1}{4}$	24	21S	30E	80.00
<b>PARCEL "H"</b>				
All	32	20S	31E	640.00
All	16	21S	31E	640.00
E $\frac{1}{2}$ SE $\frac{1}{4}$ , SW $\frac{1}{4}$ SE $\frac{1}{4}$	28	21S	30E	120.00
All	32	21S	30E	640.00
All	16	20S	31E	640.00
<b>PARCEL "I"</b>				
All	2	21S	30E	943.80
All	16	21S	30E	640.00
All	36	20S	30E	640.00
All	36	20S	31E	640.00
<b>PARCEL "J"</b>				
S $\frac{1}{2}$ SW $\frac{1}{4}$ , SW $\frac{1}{4}$ SE $\frac{1}{4}$ , N $\frac{1}{2}$ S $\frac{1}{2}$	1	21S	33E	280.00
S $\frac{1}{2}$	2	21S	33E	320.00
S $\frac{1}{2}$	3	21S	33E	320.00
S $\frac{1}{2}$	4	21S	33E	320.00
S $\frac{1}{2}$	5	21S	33E	320.00
S $\frac{1}{2}$	6	21S	33E	311.13
Lots 1, 2, 7, 8, 9, 10, 15 and 16.	5	21S	33E	318.08
E $\frac{1}{2}$	8	21S	33E	320.00
E $\frac{1}{2}$	17	21S	33E	320.00
S $\frac{1}{2}$ SW $\frac{1}{4}$ , NW $\frac{1}{4}$ SW $\frac{1}{4}$	32	20S	34E	120.00
<b>PARCEL "K"</b>				
All	16	21S	28E	640.00
All	36	21S	28E	640.00
<b>PARCEL "L"</b>				
All	16	23S	29E	640.00
NE $\frac{1}{4}$ , E $\frac{1}{2}$ SE $\frac{1}{4}$ , N $\frac{1}{2}$ NW $\frac{1}{4}$	32	23S	29E	320.00
<b>PARCEL "M"</b>				
All	2	22S	29E	640.24
All	18	21S	31E	635.04
S $\frac{1}{2}$ NW $\frac{1}{4}$ , N $\frac{1}{2}$ SW $\frac{1}{4}$	11	22S	29E	160.00

containing 31,672.50 acres, more or less, together with the right to construct and maintain thereon all works, buildings, plants, waterways or reservoirs necessary to the full enjoyment thereof, including the right to drill, maintain and operate water wells on said lands and to produce and use the water therefrom; provided, that this lease shall extend only to and include any right or interest in the lands or the minerals therein reserved to the State of New Mexico under contract of purchase or deed herefore or hereafter issued with a reservation of the minerals therein to said State.

TO HAVE AND TO HOLD the said lands and all rights and privileges granted hereunder for a term of ten years and as long thereafter as the said minerals or any of them in paying quantities shall be produced from the leased lands.

SECTION 2. In consideration of the premises, the lessee hereby agrees as follows, to-wit:

(a) Unless extension be granted by the Commissioner of Public Lands, to produce from the lands hereinabove described, and to pay the royalty hereinafter specified on, at least fifty thousand

(50,000) tons of crude potassium salts during each and every year of this lease; provided, that if in any year such production of crude potassium salts falls below the amount herein specified, the lessee shall, within thirty days after the expiration of such year, pay to the Commissioner of Public Lands a sum equal to the number of tons of such shortage below fifty thousand tons, multiplied by the average royalty paid for potassium produced from said lands during the last preceding twelve months in which there was such production, and the making of such payment shall have the same effect as if the full fifty thousand tons were produced during the year for which such payment is made.

(b) If by reason of economic conditions, or of other circumstances beyond the control of the lessee, there is a complete shutdown of its operations of mining and refining potassium on the lands hereinabove described, and all other lands in the vicinity of said lands owned or operated by the lessee, the provisions of the preceding paragraph (a) of this section shall be waived and become inoperative during the period of such shutdown; provided, that the lessee shall not be entitled to the benefits of this paragraph for more than six months at any one time, without the approval of the Commissioner of Public Lands.

(c) To pay to the lessor annually in advance on the successive anniversary dates of this lease the sum of ten cents (10¢) per acre for each and every acre of land as to which the lease may be in force when such payments shall become due, such rental payments to continue so long as this lease shall remain in force. Provided, however, that the annual rental on this lease shall not in any case be less than one hundred dollars (\$100.00) to be paid in cash.

(d) To pay to the lessor a royalty of five per cent of the value of the minerals produced hereunder, except sodium chloride or common salt, such royalty to be computed upon the value of said minerals delivered at the nearest or most accessible railroad shipping point; and to pay to the lessor a royalty of ten per cent of the actual sale price on all sodium chloride or common salt produced hereunder at the place of extraction; all such royalty provided for herein is expressly reserved to the lessor as provided by statute.

(e) Rentals and royalties due the State shall constitute a first lien on any and all improvements on the land leased, prior and superior to any other lien or encumbrance whatsoever whether created with or without notice of the lien for rental or royalties due or to become due.

(f) To furnish monthly sworn statements in detail in such form as may be prescribed by the lessor, of the amount and value of output from the leasehold delivered at the nearest or most accessible railroad shipping point, as a basis for determining the amount of royalties, and to permit at all reasonable times the inspection by the lessor or his duly authorized agent of all books and accounts of the lessee relating thereto, it being a condition of this grant that falsification of any such statements, records, books or accounts by the lessee shall be deemed and taken as sufficient ground for cancellation of this lease.

(g) To furnish the lessor annually a map showing all prospecting and development work on the leased lands and other related information, together with a report showing all buildings, structures and workings placed thereon, and a complete sworn statement of the amount of potassium and other minerals produced and saved by lessee's operations hereunder.

(h) To carry on all mining, reducing, refining and other operations in a good and workmanlike manner in accordance with approved methods and practice, having due regard to the health and safety of employees, the prevention of waste and the preservation and conservation of the property for further productive operations, and to observe all state laws relative to the health and safety of such employees, all mining and related productive operations to be subject to inspection by the lessor or his duly authorized agent and by other duly constituted state authority.

(i) To deliver to the lessor upon the termination of this lease as a result of forfeiture or otherwise, the lands covered hereby including all fixtures and improvements other than structures, buildings, derricks, machinery, equipment, tools and personal property located and used above ground and other than pumps, engines, air compressors, dynamos, motors, cars and other similar appliances used underground situated on any of said lands, in good order and condition so as to permit of immediate continued operation to the full extent and capacity of the leased premises. Provided, that upon such termination of the lease the lessee shall have ninety days from such termination to remove such machinery, tools, equipment and personal property from the leased premises if free from a state lien; and all such property shall become the property of the lessor if not so removed within said period of ninety days or within such extension of time as may be granted by the lessor.

(j) To pay when due all taxes lawfully assessed and levied under the laws of the State of New Mexico upon the improvements, output of mines and other rights, property and assets of the lessee.

(k) To comply with all statutory requirements where the surface of the lands embraced herein has been or may be leased, sold or otherwise disposed of under State laws reserving to the State of New Mexico the mineral deposits therein contained.

(l) Not to assign or sublet the premises covered hereby without the written consent and approval of the lessor.

(m) To take and preserve a core of all formations penetrated by any test well containing any of the minerals mentioned in Section 1 hereof, one-quarter of such core to be the property of the lessor and the lessee further agrees to furnish the lessor promptly copies of any and all analysis made by or for the lessee of cores taken from test wells drilled on the leased premises, and copies of analysis of samples of minerals mined therefrom upon demand of the lessor.

(n) Before commencing operations hereunder to furnish the Commissioner of Public Lands a good and sufficient bond in the penal sum of not to exceed ten thousand (\$10,000.00) dollars conditioned upon the faithful performance by the lessee of all and singular, the terms and conditions of this lease, and keep such bond in force and effect so long as lessee's operations shall continue under the terms hereof.

### SECTION 3. The lessor hereby expressly reserves:

(a) The right to permit for joint or several use such easements and rights of way upon, through or in the lands hereby leased as may be necessary or appropriate to the use or disposal of the lands for purposes other than the purpose of this lease, and the right to dispose of the surface of the said lands under the laws of the State of New Mexico now existing or hereafter enacted, insofar as said surface is not necessary or required for use of the lessee in extracting and removing the potash and other mineral

deposits therein contained. And the lessor further expressly reserves the right to lease the said lands for minerals other than those described in Section 1 hereof, but the working of said lands under such lease, for such other minerals shall not be permitted where such operations will prevent or materially interfere with the operations of the lessee hereunder.

SECTION 4. The lessee may at any time, by paying to the lessor all amounts then due the lessor as provided herein and the further sum of ten dollars (\$10.00) surrender and cancel this lease insofar as the same covers all or any portion of the land herein leased, and be relieved from further obligations or liabilities hereunder as to the lands surrendered. Provided, that all wages or monies due and payable to the workmen employed by the lessee shall have been paid and that a satisfactory showing is made to the lessor that all creditors or others having an interest in or lien or claim against the lessee are fairly and equitably protected, but in no case shall such termination be effective until the lessee shall have made adequate provision for the preservation of any mines, productive works and permanent improvements on the lands covered hereby; and provided further than this surrender clause and the option herein reserved to the lessee shall cease and become absolutely inoperative immediately and concurrently with the institution of any suit in any court of law or equity by the lessor, lessee or any assignee to enforce this lease or any of its terms, expressed or implied.

SECTION 5. If the lessee shall fail to comply with the provisions of this lease or make default in the performance or observance of any of the terms, covenants and stipulations herein, and such default shall continue for thirty days after service of written notice thereof by the lessor, then the lessor may and he is hereby expressly authorized to declare a forfeiture and cancellation of this lease. A waiver of any particular cause of forfeiture shall not prevent the cancellation and forfeiture of this lease for any other cause of forfeiture or for the same cause occurring at any other time.

SECTION 6. It is expressly understood and agreed that all of the obligations, covenants, agreements, rights and privileges of this lease shall extend to and be binding upon and inure to the benefit of the lawful assigns or successors in interest of the parties hereto.

IN WITNESS WHEREOF: The Party of the first part has hereunto signed and caused its name to be signed by its Commissioner of Public Lands, thereunto duly authorized, with the seal of his office affixed, and the lessee has signed this instrument the day and year first above written.

STATE OF NEW MEXICO

By FRANK VESELY  
Commissioner of Public Lands.

[Seal]

UNITED STATES POTASH COMPANY  
(NO STOCKHOLDERS' LIABILITY)

By HORACE M. ALBRIGHT  
Its Vice President.

ATTEST:

W. F. DINGLEY  
Secretary

STATE OF NEW YORK }  
COUNTY OF NEW YORK }ss.

On this 19th day of December, 1936, personally appeared Horace M. Albright to me personally known, who being by me duly sworn did say that he is the Vice-President and General Manager of United States Potash Company (No Stockholders' Liability) and that the seal affixed to the foregoing instrument is the corporate seal of said corporation and that said instrument was signed and sealed in behalf of said corporation by authority of its board of directors and said Horace M. Albright acknowledged said instrument to be the free act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in the certificate above written.

GERTRUDE B. STIEHLER  
Notary Public.

My commission expires: March 30, 1938.

[Seal]

Opposite Exh. L

NEW MEXICO OIL & GAS COMMISSION

ON

NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR <b>TEXACO PRODUCING INC.</b>				ADDRESS <b>BOX 728 HOBBS</b>			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input checked="" type="checkbox"/> SPILL	<input checked="" type="checkbox"/> LEAK	<input type="checkbox"/> BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY <b>SKELLY PENNOSE A UNIT</b>							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				UNIT J	SEC. 3	TWP. 23-S	RGE. 37-E COUNTY KIA
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK <b>1/2 MILE EAST OF FLOYD SIMS RANCH HOUSE</b>							
DATE AND HOUR OF OCCURENCE	3:30 AM. 3-30-87			DATE AND HOUR OF DISCOVERY 7:00 AM. 3-30-87			
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	NOT REQUIRED	IF YES, TO WHOM <b>NMOCO</b>			
BY WHOM	<b>PAT MCKELVEY</b>			DATE AND HOUR <b>7:45 AM. 3-30-87</b>			
TYPE OF FLUID LOST	<b>OIL &amp; WATER</b>			QUANTITY <b>800 BBL'S</b>	VOLUME RE- <b>240 OIL 25 H<sub>2</sub>O</b>	LOSS <b>800 BBL'S.</b>	COVERED <b>65 OIL 60 H<sub>2</sub>O</b>
DID ANY FLUIDS REACH A WATERCOURSE?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	QUANTITY <b>NONE</b>				
IF YES, DESCRIBE FULLY** <b>NONE</b>							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** <b>GAS DUMP VALVE FROZE, CAUSING TANKS TO RUN OVER, REPLACED VALVE</b>							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** <b>PICKED UP OIL &amp; H<sub>2</sub>O &amp; CLEANED TANKS &amp; LOCATION</b>							
DESCRIPTION OF AREA	FARMING		GRAZING	URBAN	OTHER* <b>TANK BATTERY LOCATION</b>		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCK	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** <b>TEMP. 14°, SNOW</b>							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	<i>Joe M. Parker</i>			TITLE PROD. FOREMAN DATE <b>3-30-87</b>			
*SPECIFY <b>✓</b> **ATTACH ADDITIONAL SHEETS IF NECESSARY							

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 01 - 24 - 86 Time of Occurrence: 11 a.m., p.m.

Date Reported to USGS 01 - 25 - 86 Time Reported to USGS: a.m., p.m.

Location: State New Mexico; County Eddy

NE 1/4 NE 1/4 Section 26 T. 26 S., R. 29 E., Meridian

Operator: Texaco Producing Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE B. D. Federal

Lease Number: NM 46146; Unit Name or C.A. Number \_\_\_\_\_

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify) Oil & Salt Water Spill

Cause of Event: Oil hauling truck backed over and broke out production  
line from test separator to test tanks.

Volumes of Pollutants I. Discharged or Consumed: 13 bbls 39° gravity oil  
100 bbls water  
II. Recovered: 5 bbls oil & 75 bbls water

Time Required to Control Event (in hours): 10 hrs to repair line & clean up loc.

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Vaccum truck picked up 5 bbls oil 75  
bbls backhoe & gang. Cleaned up location & producing equipment

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: BLM  
at Carlsbad NM

Action Taken to Prevent Recurrence: Installed baracade to prevent  
reoccurrence

General Remarks: \_\_\_\_\_

Signature / W.B. Cade Date 02/13/86  
Title District Operations Manager

FOR USGS USE ONLY  
District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.					ADDRESS P. O. Box 728, Hobbs, NM 88240				
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLowOUT	OTHER*			
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK CITY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*		
NAME OF FACILITY	Texaco Mobil State Tank Battery								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) SEE NEZ					SEC. 25	TWP. 17S	RGE. 34E	COUNTY Lea	
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 3/4 mile from Buckeye Store									
DATE AND HOUR OF OCCURENCE 03/01/86 Midnight				DATE AND HOUR OF DISCOVERY 8:30 a.m. 03/01/86					
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, Jerry Sexton OCD TO WHOM B. Cade Hobbs District Oper. Manager					
BY WHOM	P. W. Minchew								
TYPE OF FLUID LOST Oil				QUANTITY OF LOSS 245 Bbl	VOLUME RE-COVERED 20 Bbl				
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO XX	QUANTITY					
IF YES, DESCRIBE FULLY**									
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Corroded 3" nipple in fill line on tank									
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Battery yard and road - recovered fluid - brought in sand to cover.									
DESCRIPTION OF AREA	FARMING		GRAZING X		URBAN		OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY	SNOW		
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** Clear, Dry & 60 degrees									
SIGNED	W. B. Cade		TITLE District Oper. Manager DATE 03/10/86						

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.				ADDRESS P.O. Box 728, Hobbs, NM, 88240			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input checked="" type="checkbox"/> LEAK X	<input type="checkbox"/> BLOWOUT	<input type="checkbox"/> OTHER*	
TYPE OF FACILITY	DRLG WELL	FRDG WELL	TANK CTTY	PIPE LINE X	GASO PLNT	OIL RFY	<input type="checkbox"/> OTHER*
NAME OF FACILITY Skelly Unit							
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				SEC. 22	TWP. 17S	RGE. 31E	COUNTY Eddy
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 1/2 Mile East 529 and 82 intersection							
DATE AND HOUR OF OCCURRENCE 04-16-86 in a.m.				DATE AND HOUR OF DISCOVERY 04-16-86 7:30 a.m.			
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO X	NOT RE- QUIRED	IF YES, TO WHOM			
BY WHOM				DATE AND HOUR			
TYPE OF FLUID LOST	Oil and water			QUANTITY OF LOSS 6 oil	VOLUME RE- COVERED 4		
DID ANY FLUIDS REACH A WATERCOURSE?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO X	QUANTITY None				
IF YES, DESCRIBE FULLY**  None							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  2: flowline hole, replace it.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Sandy and clay							
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	<input checked="" type="checkbox"/> OTHER* X	
SURFACE CONDITIONS	SANDY	SANDY LOAM X	CLAY	ROCKY	WET	DRY	<input type="checkbox"/> SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  61° None							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	<u>W.B. Ceder</u>			TITLE Dist. Oper. Mgr. DATE 05-13-86			
SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO STATE INSPECTION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.				ADDRESS P. O. Box 728, Hobbs, NM 88240				
REPORT OF	FIRE	BREAK	SPILL <input checked="" type="checkbox"/>	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRG WELL	PIPE WELL	TANK CITY <input checked="" type="checkbox"/>	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY West Lovington Unit								
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION) SE $\frac{1}{4}$ - SE $\frac{1}{4}$					SEC.	TWP.	RGE.	COUNTY
					5	MTS	36E	Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 6 miles South of Lovington NM								
DATE AND HOUR OF OCCURENCE 04/27/86				DATE AND HOUR OF DISCOVERY 04/27/86 6:00 a.m.				
WAS IMMEDIATE NOTICE GIVEN?	YES	NO <input checked="" type="checkbox"/>	NOT RE- QUIRED	IF YES, TO WHOM				
BY WHOM				DATE AND HOUR				
TYPE OF FLUID LOST Oil & Water				QUANTITY 35 Oil 15 Water OF LOSS 50 Bbl	VOLUME RE-32 Oil 13 Water COVERED 45 Bbl			
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO <input checked="" type="checkbox"/>	QUANTITY				
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Cows rubbed pop valve open, lost gas pressure on separator. Change style pop valves.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Spray Oil & Water over location and on pasture. Picked up fluid & covered with sand.								
DESCRIPTION OF AREA	FARMING		GRAZING <input checked="" type="checkbox"/>	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY <input checked="" type="checkbox"/>	WET	DRY <input checked="" type="checkbox"/>	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  Clean - Windy 60° None								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED *SPECIFY	W. B. Lehr			TITLE Dist. Oper. Manager			DATE 05/13/86	
**ATTACH ADDITIONAL SHEETS IF NECESSARY								

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.				ADDRESS P.O. Box 728, Hobbs, NM, 88240			
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK CITY X	PIPE LINE	GASO PLNT	OIL R.F.Y	OTHER*
NAME OF FACILITY New Mexico State "BZ" NCT-8							
LOCATION OF FACILITY (QUARTER/QUADRANT SECTION OR FOOTAGE DESCRIPTION) SW/4				SEC. 16	TWP. 23S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 9 Miles South of Eunice, New Mexico							
DATE AND HOUR OF OCCURENCE	Unknown			DATE AND HOUR OF DISCOVERY 8:00 a.m.			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED	IF YES, TO WHOM Jerry Sexton			
BY WHOM	Charley Musslewhite			DATE AND HOUR 9:00 a.m. 03-20-86			
TYPE OF FLUID LOST	Oil & prod. H <sub>2</sub> O			QUANTITY OF LOSS	115 Oil 325 H <sub>2</sub> O	VOLUME RE-COVERED	75 Oil 290 H <sub>2</sub> O
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Dump valve failed on heater and put H <sub>2</sub> O in tank, causing tank to overflow.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Sandy pasture land, picked up H <sub>2</sub> O and oil with transport and vacuum truck, covered up spill in pasture.							
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN		OTHER*	
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Dry and fair							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	<i>W.B. Lehr</i>			TITLE Dist. Oper. Mgr.		DATE 05-13-86	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.				ADDRESS P.O. Box 728, Hobbs, New Mexico, 88240				
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input type="checkbox"/> LEAK	<input type="checkbox"/> BLOWOUT	<input type="checkbox"/> OTHER*		
TYPE OF FACILITY	CRDG WELL	PROD WELL X	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	<input type="checkbox"/> OTHER*	
NAME OF FACILITY	State AP Well No. 1							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) NW/4 SW/4					SEC. 9	TWP. 18S	RGE. 35E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 4 Miles South of Buckeye								
DATE AND HOUR OF OCCURRENCE 5:00 P.M. 05-12-86				DATE AND HOUR OF DISCOVERY				
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NOT REQUIRED	<input checked="" type="checkbox"/> X	IF YES, TO WHOM			
BY WHOM	Jay Gernhardt			DATE AND HOUR 5:00 P.M. 05-12-86				
TYPE OF FLUID LOST	Produced Oil			QUANTITY OF LOSS 5 bbl.			VOLUME RE-COVERED	None
DID ANY FLUIDS REACH A WATERCOURSE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> X	QUANTITY				
IF YES, DESCRIBE FULLY**								

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Fire burnt 3" plastic flowline and fluid. Cause of fire unknown.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

5 acres of pasture burnt - no clean up.

DESCRIPTION OF AREA	FARMING	GRAZING X	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	SNOW

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

Temp. 95° Dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

*W. B. Ceder*

TITLE Dist. Opr. Mgr.

DATE 06-03-86

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.			ADDRESS P.O. Box 728, Hobbs, New Mexico 88240				
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRG WELL	ROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY N.M. "CK" State NCT-1 Gun Barrell							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) SE/NW				SEC. 36	TWP. 18	RGE. 31	COUNTY Eddy
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 18 Miles S.E. of Loco Hills, New Mexico							
DATE AND HOUR OF OCCURRENCE Saturday night 05-03-86				DATE AND HOUR OF DISCOVERY Sunday 9:00 A.M. 05-04-86			
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM			
BY WHOM				DATE AND HOUR			
TYPE OF FLUID LOST 67 bbls. oil & 104 bbls. water				QUANTITY OF LOSS 67 oil/104 water	VOLUME RE-COVERED none		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY			
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Valve was opened by cattle on bottom of Gun Barrell							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Battery approximately 81' x 279'							
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN		OTHER*	
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY X	SOIL
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Dry 60°							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	<i>W. B. Eddr</i>			TITLE Dist. Opr. Mgr.		DATE 06-03-86	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.				ADDRESS P. O. Box 728 Hobbs, NM 88240			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input type="checkbox"/> LEAK	<input type="checkbox"/> BLOWOUT	<input type="checkbox"/> OTHER*	
TYPE OF FACILITY	DRILL WELL	FLOOR WELL	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	<input type="checkbox"/> OTHER*
NAME OF FACILITY	New Mexico BZ State NCT-5 T/B						
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)	NE 4 NW 4			SEC. 29	TWP. 215	RGE. 35E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK	14 miles SW of Oil Center, NM						
DATE AND HOUR OF OCCURRENCE	06/02/86 10:00 a.m.			DATE AND HOUR OF DISCOVERY	06/02/86 11:00 a.m.		
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	<input checked="" type="checkbox"/> NOT RE- QUIRED	IF YES, TO WHOM	06/03/86 "EJ"		
BY WHOM	Odis Henley						
TYPE OF FLUID LOST	Crude Oil, Produced Water			QUANTITY OF LOSS	VOLUME RE- COVERED 94 Oil; 186 wt-		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO	<input checked="" type="checkbox"/>	QUANTITY			
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Lightning struck 500 bbl. Bolted tank No. 5727, Splitting tank, catching oil on fire. Fire burnt all oil, Rain put fire out.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Battery Yard, Pasture Land 120' X 450'							
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN		OTHER*
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Rain 60°							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	W. B. Henley		TITLE Dist. Oper. Manager		DATE 06/05/86		

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 06 - 02 - 86 Time of Occurrence: 1:00 a.m., XXM

Date Reported to USGS 06 - 02 - 86 Time Reported to USGS: 11:00 a.m., XXL

Location: State New Mexico; County Lea

SE 1/4 NE 1/4 Section 5 T. 24 S., R. 37 E., \_\_\_\_\_ Meridian

Operator: Texaco Producing Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE Myers Langlie

Lease Number: 91-013817; Unit Name or C.A. Number Mattix Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify) \_\_\_\_\_

Cause of Event: Lightning shut down electric injection plant which caused tanks to run over into emergency pit which ran over into pasture.

Volumes of Pollutants I. Discharged or Consumed: 400 Bbls 10 Bbls oil  
II. Recovered: 380 less

Time Required to Control Event (in hours): 9 hrs

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Fluid picked up from pasture 06/02/86.  
Spill covered with new soil 06/04/86.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: \_\_\_\_\_  
NMOCCD

Action Taken to Prevent Recurrence: Repaired dike around tank battery  
which will contain fluid into tank battery.

General Remarks: \_\_\_\_\_

Signature W. B. Lehr Date 06/27/86  
Title District Operations Manager

FOR USGS USE ONLY  
District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc				ADDRESS P. O. Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFTY	OTHER*	
NAME OF FACILITY New Mexico "E" State NCT-1							
LOCATION OF FACILITY (QUARTER/QUADRANT SECTION OR FOOTAGE DESCRIPTION) NE4 SW4				SEC. 1	TWP. 205	RGE. 36E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 4 mi. SW Monument NM							
DATE AND HOUR OF OCCURRENCE 07/01/86				DATE AND HOUR OF DISCOVERY 07/02/86 7:30 a.m.			
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM E.J.			
BY WHOM	L.M. Lehman			DATE AND HOUR	07/02/86 1:00 p.m.		
TYPE OF FLUID LOST Crude Oil				QUANTITY OF LOSS 44 Bbls crude	VOLUME RE-COVERED 14 Bbls		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY			
IF YES, DESCRIBE FULLY** N/A							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Relief pumpers flagged tank 116477. Closing & sealing the equalizer line. And test line on top of tank, thinking the test line was the production fill line. Thus leaving the bottom fill valve from treater open and causing tank to fill & overflow. Switched prod. to empty tank.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Area tank battery & access road. Clean up. Vacuum truck picked up 14 bbls crude. Clean up T/B by removing oil soaked dirt & gravel. Replace w/fresh dirt.							
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET X	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 75° Overcast.							
SIGNED	<i>W. B. Leh</i>			TITLE District Oper. Manager		DATE 07/11/86	
*SPECIFY		**ATTACH ADDITIONAL SHEETS IF NECESSARY					

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 06-25-86 Time of Occurrence: 8:00 a.m., p.m.

Date Reported to USGS 06-26-86 Time Reported to USGS: 10:00 a.m., p.m.

Location: State New Mexico; County Lea

SE ¼ NE ¼ Section 5 T. 24 S., R. 37 E., Meridian

Operator: Texaco Producing Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Myers Langlie

Lease Number: 91-013817; Unit Name or C.A. Number Mattix Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify)

Cause of Event: High wind knocked down power lines to injection plant which shut down injection tanks, ran down into pit & pit ran over into pasture.

Volumes of Pollutants I. Discharged or Consumed: 400 350-Water

II. Recovered: 380 340-Water

40-Oil

Time Required to Control Event (in hours): 10 hrs cleanup

Action Taken to Control the Event, Description of Resultant Damage, Clean-up Procedures, and Dates: Electric line repairs, pit emptied new dirt hauled in to cover spill

Cause and Extent of Personnel Injury: None.

Other Federal, State, and Local Governmental Agencies Notified:

NMOC

Action Taken to Prevent Recurrence: Electric line was repaired.

General Remarks:

Signature W.B. Leder Date 07/29/86  
Title District Operations Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.					ADDRESS P.O. Box 728, Hobbs NM 88240			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input checked="" type="checkbox"/> LEAK X	<input type="checkbox"/> BLOWOUT	<input type="checkbox"/> OTHER*		
TYPE OF FACILITY	CRSG WELL	FRUD WELL	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	<input type="checkbox"/> OTHER*	
NAME OF FACILITY Lovington San Andres Unit Well #23								
LOCATION OF FACILITY (QUARTER/QUADRANT OR SECTION OR FOOTAGE DESCRIPTION)					SEC. 6	TWP. 17S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK					5 miles South of Lovington NM			
DATE AND HOUR OF OCCURRENCE 12:00 a.m. 07/17/86					DATE AND HOUR OF DISCOVERY 1:00 p.m. 07/17/86			
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES X	<input type="checkbox"/> NO	NOT RE- QUIRED		IF YES, TO WHOM			
BY WHOM	Pumper				DATE AND HOUR			
TYPE OF FLUID LOST Oil & Water 2 Oil 3 Wtr					QUANTITY OF LOSS 5 bbl total	VOLUME RE- COVERED None		
DID ANY FLUIDS REACH A WATERCOURSE?					<input type="checkbox"/> YES X	<input type="checkbox"/> NO	QUANTITY	
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**								
Truck ran over union in flowline, fix leak, cover with dirt.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**								
DESCRIPTION OF AREA		FARMING	GRAZING X		URBAN	OTHER*		
SURFACE CONDITIONS		SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**								
Clean, 90°, None								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	<i>W. B. Lehr</i>			TITLE District Oper. Manager DATE 07/29/86				
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY							

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.				ADDRESS Hobbs				
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRLG WELL	HAZD WELL	PIPE CITY X	PIPE LINE	GASO PLNT	OIL REFY	OTHER*	
NAME OF FACILITY	State AZ #1				SEC.	TWP.	RGE.	COUNTY
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)					16	17S	31E	Eddy
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK					1 mi. NW of Sweet Gum St.			
DATE AND HOUR OF OCCURRENCE	08/03/86 9:00 a.m.				DATE AND HOUR OF DISCOVERY	08/04/86 9:00 p.m.		
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT RE- QUIRED X		IF YES, TO WHOM			
BY WHOM					DATE AND HOUR			
TYPE OF FLUID LOST	Oil				QUANTITY OF LOSS	69	VOLUME RE- COVERED	None
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO	X		QUANTITY			
IF YES, DESCRIBE FULLY**								

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Pumper opened bleed valve on stock tank and forgot to shut it off.

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Lease road covered with tractor.

DESCRIPTION OF AREA	FARMING	GRAZING		URBAN	OTHER*		
SURFACE CONDITION'S	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

90° - None.

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

*W. B. Cade*

TITLE Dist. Oper. Mgr.

DATE 08/18/86

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.						ADDRESS P. O. Box 728 Hobbs, NM 88240			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input type="checkbox"/> LEAK	<input type="checkbox"/> BLOWOUT	<input type="checkbox"/> OTHER*			
TYPE OF FACILITY	CRLG WELL	FROD WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	<input checked="" type="checkbox"/> OTHER*		
NAME OF FACILITY	Skelly Unit LACT #2								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)						SEC. 28	TRP. 17S	RGE. 31E	COUNTY Eddy
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK $\frac{1}{4}$ SE of 529 & 82 Intersection									
DATE AND HOUR OF OCCURRENCE	08/10/86 6:00 a.m.			DATE AND HOUR OF DISCOVERY			08/10/86 7:00 a.m.		
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NOT REQUIRED	IF YES, TO WHOM					
BY WHOM				DATE AND HOUR					
TYPE OF FLUID LOST	Crude Oil & Prod. Water			QUANTITY OF LOSS	Due to Fire Unknown		VOLUME RE-COVERED	None	
DID ANY FLUIDS REACH A WATERCOURSE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	X	QUANTITY					
IF YES, DESCRIBE FULLY**									
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Hole in fire tube, replace heater treater.									
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Leave road covered with fresh dirt.									
DESCRIPTION OF AREA	FARMING		GRAZING X		URBAN		OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET	DRY X	SNOW		
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 67° None.									
SIGNED	W. B. Lehr			TITLE District Oper. Manager			DATE 09/03/86		

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.				ADDRESS P.O. Box 728, Hobbs, NM 88240			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input checked="" type="checkbox"/> SPILL X	<input type="checkbox"/> LEAK	<input type="checkbox"/> CLOUDOUT	<input type="checkbox"/> OTHER*	
TYPE OF FACILITY	CRDG WELL	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	<input type="checkbox"/> OTHER*
NAME OF FACILITY H. T. Montieth #2							
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				SEC. 20	TWP. T16S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 4 miles Southeast of Lovington NM							
DATE AND HOUR OF OCCURRENCE 08/19/86				DATE AND HOUR OF DISCOVERY 08/19/86 8:00 a.m.			
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NOT RE- QUIRED	IF YES, TO WHOM			
BY WHOM	DATE AND HOUR						
TYPE OF FLUID LOST Oil	QUANTITY OF LOSS 100				VOLUME RE- COVERED 75		
DID ANY FLUIDS REACH A WATERCOURSE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO X	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Cows got in battery fence and opened 1" valve on circulating pump & gauge glass on LACT Unit.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Oil all on location-picked up-75 bbl with vacuum truck and covered with caliche.							
DESCRIPTION OF AREA	FARMING		GRAZING X		URBAN	OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** Clean & Dry							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED <i>W. B. Lehr</i>	TITLE District Oper. Manager DATE 09/03/86						
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Prod. Inc.				ADDRESS P. O. Box 728, Hobbs, NM 88240				
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input checked="" type="checkbox"/> LEAK X	<input type="checkbox"/> BLOWOUT	<input type="checkbox"/> OTHER*		
TYPE OF FACILITY	ICRLG WELL	FRUD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	<input type="checkbox"/> OTHER*	
NAME OF FACILITY	Percy Hardy TB							
LOCATION OF FACILITY (QUADRANT/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)	SW/4 SW/4				SEC. 17	TWP. 21S	RGE. 37E	COUNTRY Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK	1½ miles North of Eunice, NM							
DATE AND HOUR OF OCCURRENCE	Unknown			DATE AND HOUR OF DISCOVERY 9:30 a.m. 10/13/86				
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NOT RE- QUIRED	IF YES, TO WHOM NMOCC				
BY WHOM	KENT L. JOHNSON			DATE AND HOUR	10/14/86 10:00 a.m.			
TYPE OF FLUID LOST	Oil			QUANTITY OF LOSS	40	VOLUME RE- COVERED	11	
DID ANY FLUIDS REACH A WATERCOURSE?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	QUANTITY					
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Hok came in bottom of tank, cleaned up spill, picked up oil & covered oil.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Tank battery pad, sandy pasture land.								
DESCRIPTION OF AREA	FARMING		GRAZING X		URBAN	OTHER*		
SURFACE CONDITIONS	<input checked="" type="checkbox"/> SANDY X	<input type="checkbox"/> SANDY LOAM	<input type="checkbox"/> CLAY	<input type="checkbox"/> ROCKY	<input type="checkbox"/> WET	<input type="checkbox"/> DRY	<input type="checkbox"/> SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** Cool & Dry								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	W. B. Lehr			TITLE Dist. Operations Mgr. DATE 10/28/86				
*SPECIFY				**ATTACH ADDITIONAL SHEETS IF NECESSARY				

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.				ADDRESS P. O. Box 728, Hobbs, NM			
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK ETY	PIPE LINE X	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	Lovington Paddock Unit						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 1	TWP. 17S	RGE. 36E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				5 miles South of Lovington			
DATE AND HOUR OF OCCURRENCE	10/27/86 11:00 p.m.			DATE AND HOUR OF DISCOVERY	10/28/86 7:00 a.m.		
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES,	TO WHOM Superintendent		
BY				DATE	AND HOUR 10/28/86		
WHOM	H. G. Hager			QUANTITY	10 Oil	VOLUME RE-COVERED	10 Oil.
TYPE OF FLUID LOST	Oil and Water			OF LOSS	40 Water	30 Water	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Pipe pulled out of collar, (put in union)							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
300' X 50' Covered w/sand							
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Clean & Warm							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	<i>W. B. Cade, Jr.</i>			TITLE Dist. Oper. Mgr.		DATE 11/24/86	
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing Inc.					ADDRESS P. O. Box 728 Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRG WELL	PROD WELL X	PARK BTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	Central Vacuum Unit							
LOCATION OF FACILITY (QUARTER/QUADRANT SECTION OR FOOTAGE DESCRIPTION) SW <sup>1</sup> , SW <sup>2</sup>					SEC. 31	TWP. 17S	RGE. 35E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 1½ miles SE Buckeye Store								
DATE AND HOUR OF OCCURRENCE	11/19/86 12:01 6:00 a.m.			DATE AND HOUR OF DISCOVERY 11/19/86 9:20 a.m.				
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM Ray Smith, NMOCC				
BY WHOM	Maxey G. Brown			DATE AND HOUR 11/19/86 9:25 a.m.				
TYPE OF FLUID LOST	Produced Fluids			QUANTITY OF LOSS	125 Bbls	VOLUME RE-COVERED	110 Bbls	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY	Loss - 10 Bbls water, 5 Bbls Oil				
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Leak in 3" steel flowline Replace bad joint								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** 100' X 150' area. Vacuum truck recovered fluid Fresh sand spread over area								
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 65° Clear sky, S/SW winds 5-15 mph								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	W.B. Lub			TITLE Dist. Oper. Manager		DATE 12/02/86		

SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Producing, Inc.				ADDRESS PBox 730, Hobbs, N. M., 88240			
REPORT OF	FIRE	BREAK	SPILL <input checked="" type="checkbox"/>	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK <input checked="" type="checkbox"/>	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY Mexico "F: #3							
LOCATION OF FACILITY (QUADRANT/QUADR- Sec. 2-15S-37E- TER SECTION OR FOOTAGE DESCRIPTION) SW 1/4 -MEX				SEC. 2	TWP. 15	RGE. 37	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 12 miles East of Lovington							
DATE AND HOUR OF OCCURRENCE	9-26-86 12 Noon			DATE AND HOUR OF DISCOVERY	9-26-86 1:00 P.M.		
WAS IMMEDIATE NOTICE GIVEN?	YES <input checked="" type="checkbox"/>	NO	NOT REQUIRED	IF YES, TO WHOM			
BY WHOM	Charles R. Bittle			DATE AND HOUR	9-26-86 1:30 P.M.		
TYPE OF FLUID LOST	Oil and Water			QUANTITY OF LOSS	20 Oil 40 Water	VOLUME RE-COVERED	10 Oil water
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO <input checked="" type="checkbox"/>	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Rods parted causing walking beam to come off letting the horses head fall and hit the casing valve breaking it. The unit and well have been repaired.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Oil sprayed the pasture covering 3.6 acres, 250' wide and 660' long. Picked up as much as possible and covered with sand							
DESCRIPTION OF AREA	FARMING		GRAZING <input checked="" type="checkbox"/>	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY <input checked="" type="checkbox"/>	WET	DRY <input checked="" type="checkbox"/>	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** Wind blowing about 15 MPH out of the South West as a temperature of about 80 and clear and dry.							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED <i>W. B. Bittle</i>	TITLE Dist. Opr. Mgr.			DATE 12-18-86			

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Getty Oil Company				ADDRESS P. O. Box 728, Hobbs, N.M. 88240				
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*		
TYPE OF FACILITY	DRLG WELL	FRDG WELL X	TANK CTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY Myers Langlie Mattix Unit Well No. 247								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) NW-4 - SW4					SEC. 7	THP. 24-S	RGE. 37-E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 10 Miles South of Eunice								
DATE AND HOUR OF OCCURENCE 1-23-85 7:00 AM				DATE AND HOUR OF DISCOVERY 1-23-85 2:00 PM				
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED X	IF YES, TO WHOM				
BY WHOM				DATE AND HOUR				
TYPE OF FLUID LOST Oil & Produced Water				QUANTITY OF LOSS	20 BO	90 BW	VOLUME RE-COVERED 20 BO 85 BW	
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Flow Line burst due to cold weather, repaired.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Old road path - all fluid picked up and area covered with dirt.								
DESCRIPTION OF AREA	FARMING		GRAZING X		URBAN		OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM X	CLAY	ROCKY	WET	DRY X	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** Clear and cold.								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED ✓	W.B. Lusk			TITLE Dist. Opr's. Mgr. DATE 1-29-85				
*SPECIFY      **ATTACH ADDITIONAL SHEETS IF NECESSARY								

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 1 - 30 - 85 Time of Occurrence: 10 a.m., p.m.

Date Reported to USGS 1 - 31 - 85 Time Reported to USGS: 9:00 a.m., p.m.

Location: State New Mexico; County Lea

NE 1/4 SW 1/4 Section 26 T. 26-S .., R. 37 E .., NMPM Meridian

Operator: TEXACO, Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: LC-030174-(b); Unit Name or C.A. Number W.H.Rhodes 'B' Federal NCT-I

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify) \_\_\_\_\_

Cause of Event: Corrosion in trunk line caused leak.

Volumes of Pollutants I. Discharged or Consumed: 655 BBLS 215-Oil 440-Water

II. Recovered: 235 BBLS 125-Oil 110-Water

Time Required to Control Event (in hours): 5

Action Taken to Control the Event, Description of Resultant Damage, Clean-up Procedures, and Dates: Shut in satellite station bled line down. Picked up fluids. Cleaned area affected. Pipe replacement pending. Delivery of pipe.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: NMOCD

Action Taken to Prevent Recurrence: Replace pipe.

General Remarks: \_\_\_\_\_

Signature / W.B. Btr Date 2-4-85  
Title District Operations Manager

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District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR <b>TEXACO, Inc.</b>				ADDRESS P. O. Box 728, Hobbs, N.M. 88240-			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input type="checkbox"/> LEAK	<input type="checkbox"/> BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL <input checked="" type="checkbox"/>	TANK BTTY	PIPE LINE	GASO PLNT	OIL RPFY	OTHER*
NAME OF FACILITY	<b>Central Vacuum Unit Well #89</b>						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 36	TWP. 17-S	RGE. 34-E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK <b>2 Miles South of Buckeye Store beside State Hwy. #8</b>							
DATE AND HOUR OF OCCURRENCE	2-5-85 - 8:30 AM			DATE AND HOUR OF DISCOVERY 2-5-85 8:30 AM			
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	NOT REQUIRED	IF YES, TO WHOM Jerry Sexton			
BY	WHOM Monte Duncan Relief Head Pumper						
TYPE OF FLUID LOST	8 Barrels oil on top of H2O in reverse pit			QUANTITY OF LOSS	VOLUME RE-COVERED		
DID ANY FLUIDS REACH A WATERCOURSE?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	X	QUANTITY	-0-		
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Pulling unit crew hit hose running from wellhead in to reverse pit, which contained about 100 barrels H2O and 5 bbls oil. Static electricity started fire which was confined to the pit. Fire put out by Lovington Fire Dept.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Fire confined to reverse unit pit. Lovington Fire Dept. put fire out. No damage was done to ground or the reverse unit pit.							
DESCRIPTION OF AREA	FARMING		GRAZING <input checked="" type="checkbox"/>	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY <input checked="" type="checkbox"/>	WET	DRY	SNOW <input checked="" type="checkbox"/>
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  35° wind from NE @ 5 M.P.H. Soil frozen							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED <i>W.B. Ldr</i>	TITLE Dist. Opr. Mgr.			DATE 2-13-85			

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Getty Oil Company				ADDRESS Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	Skelly Penrose 'A' Unit Tank BTTY #6						
LOCATION OF FACILITY (QUARTER/QUADRANT SECTION OR FOOTAGE DESCRIPTION)				SEC.	TWP.	RGE.	COUNTY
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK	6 Miles South of Eunice, New Mexico						
DATE AND HOUR OF OCCURRENCE	2-9-85		2:00 AM	DATE AND HOUR OF DISCOVERY	2-9-85 8:15 AM		
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM	Eddie See		
BY WHOM	Mike Parker						
TYPE OF FLUID LOST	Oil			QUANTITY OF LOSS	76	VOLUME RE-COVERED	55
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY	NONE			
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** BACK PRESSURE VALVE FAILED, PARTICULARLY FILLED TKS W/WATER, PUSHED OIL OUT							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** 30'x90' SOUTH OF TANK BTTY. VACUUMED UP OIL AND COVERED W/SAND. THE REST CONTAINED IN ROAD. VACUUMED UP OIL AND GRADED ROAD.							
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY X	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  38° Windy and Cold							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED /	W. B. Ulrich			TITLE Dist. Opr. Mgr.		DATE 2-19-85	
*SPECIFY      **ATTACH ADDITIONAL SHEETS IF NECESSARY							

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 3 - 8 - 85 Time of Occurrence: 9 a.m., p.m.

Date Reported to USGS 3 - 8 - 85 Time Reported to USGS:   a.m., p.m.

Location: State N.M.; County Lea

NE 1/4 NE 1/4 Section 24 T. 25 S., R. 37 E., NM Meridian

Operator: Getty Oil Company

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: LC-032650B; Unit Name or C.A. Number A.B. Coates 'C'

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify)

Cause of Event: Corrosion in 210 Tank

Volumes of Pollutants I. Discharged or Consumed: 164 Oil 37 Water

II. Recovered: 14 BBLS Oil

Time Required to Control Event (in hours): 2

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Picked up fluid with vacuum truck,  
Cleaned location.

Cause and Extent of Personnel Injury: NONE

Other Federal, State, and Local Governmental Agencies Notified: NMOCC

Action Taken to Prevent Recurrence: REPAIR TANK

General Remarks:   

Signature W.B. Lub Date 3-14-85  
Title District Operations Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR	TEXACO Inc.				ADDRESS	P.O. Box 728, Hobbs, NM 88240		
REPORT OF	FIRE XX	BREAK	SPILL	LEAK	BLowOUT	OTHER*		
TYPE OF FACILITY	CRG WELL	PIPE WELL	TANK BTTY XX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	J.K. Rector							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) NE/4 NE/4					SEC.	TWP.	RGE.	COUNTY
					31	21S	36E	Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 4 1/2 miles west Eunice, N.M.								
DATE AND HOUR OF OCCURRENCE 5/26/85 - 2:30 AM				DATE AND HOUR OF DISCOVERY 5/26/85 10:30 AM				
WAS IMMEDIATE NOTICE GIVEN?	YES XX	NO	NOT REQUIRED	IF YES, TO WHOM J. Sexton				
BY WHOM	L.M. Lehman							
TYPE OF FLUID LOST Crude oil				QUANTITY OF LOSS	42 bbls.	VOLUME COVERED	none	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY					
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Lightning struck 500 bbl welded stock tank that contained 1'3" crude oil caught on fire. Fire Dept. extinguished fire at 3:00 AM.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Tank Btry. yard								
DESCRIPTION OF AREA	FARMING		GRAZING XX	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XX	WET XX	DRY	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 74° raining								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	<i>✓ W.B. Lehr</i>			TITLE		Dist. Opr. Mgr. DATE 5/29/85		
*SPECIFY		**ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Getty Oil Company				ADDRESS P.O. Box 728, Hobbs, N.M. 88240					
REPORT OF	FIRE	BREAK	SPILL XX	LEAK	BLOWOUT	OTHER*			
TYPE OF FACILITY	CRG WELL	FRD WELL	TANK CITY XX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*		
NAME OF FACILITY	R.L. Brunson								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SE4	SE4	SEC. 4	TWP. 22S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 1 mile southwest of Eunice, N.M.									
DATE AND HOUR OF OCCURRENCE 5/12/85 3:30 AM				DATE AND HOUR OF DISCOVERY 8:00 AM 5/12/85					
WAS IMMEDIATE NOTICE GIVEN?	YES XX	NO	NOT REQUIRED	IF YES, TO WHOM J.T. Sexton					
BY WHOM	R.W. Lemmons			DATE AND HOUR 5/12/85 - 8:00 AM					
TYPE OF FLUID LOST Crude oil				QUANTITY OF LOSS 30 bbls.			VOLUME COVERED none		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY						
IF YES, DESCRIBE FULLY**									
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** 1/4" x 4" nipple broke off bleed line on circulating Pm. oil gravity flowed thru top of circ Pm. Replaced 1/4" nipple									
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** 30 x 50 tnk btry 10' x 300' roadway, spill contained in T/B yard and access road. Removed oil soaked dirt.									
DESCRIPTION OF AREA	FARMING		GRAZING XX	URBAN		OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY XX	ROCKY	WET	DRY XX	SNOW		
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** Dry 70°.									
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF									
SIGNED <i>W.B. Lehr</i>	TITLE Dist. Opr. Mgr.			DATE 5/29/85					

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P.O. Box 728, Hobbs, N.M. 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRDG WELL	ROD WELL X	TANK CITY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	Vacuum Grayburg San Andres Unit Well #13 Flowline						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 35	TRP. 17	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK	2 1/2 miles SW of Buckeye						
DATE AND HOUR OF OCCURRENCE	Early A.M. - 5/19/85			DATE AND HOUR OF DISCOVERY 5/19/85 10:00 AM			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED XX	IF YES, TO WHOM Written			
BY WHOM	H.A. Nivens			DATE AND HOUR			
TYPE OF FLUID LOST	Produced water and oil			QUANTITY OF LOSS	40 BBL wtr	VOLUME RE-COVERED	-0-
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Hole in 4" flowline due to internal corrosion. Installed 4" pipe repair clamp.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Rocky, grassy grazing land - wet with rain water. Covered with sand.							
DESCRIPTION OF AREA	FARMING		GRAZING XX	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XX	WET XX	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  60° - 0-wind, partly cloudy - had received approximately 7/10 inch of rain during the past 3 days.							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	W.B. Lusk			TITLE Dist. Opr. Mgr.		DATE 5/29/85	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 6 - 6 - 85 Time of Occurrence: 9 a.m., XXXX

Date Reported to USGS 6 - 7 - 85 Time Reported to USGS: 10:30 a.m., XXXX

Location: State New Mexico; County Lea

NW 1/4 NW 1/4 Section 19 T. 25 S., R. 38 E., \_\_\_\_\_ Meridian

Operator: TEXACO Inc.

Surface Ownership: FEDERAL, XXXXXXXXXXXXXX

Lease Number: NM29-0349956; Unit Name or C.A. Number C.E. Penney NCT-4

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, /OIL SPILL, /

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify) \_\_\_\_\_

Cause of Event: Pumper did not open fill valves after closing equalizer.

Volumes of Pollutants I. Discharged or Consumed: 20 Bbls.

II. Recovered: 15 Bbls.

Time Required to Control Event (in hours): 4 hrs.

Action Taken to Control the Event, Description of Resultant Damage, Clean-up Procedures, and Dates: Opened fill valves, cleaned up tank, and Battery yard.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: NMOCD.

Action Taken to Prevent Recurrence: Reprimanded employee and instructed employee in the switching of stock tanks.

General Remarks: \_\_\_\_\_

Signature W.B. Lehr

Date 6/13/85

Title Dist. Opr. Mgr.

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO PRODUCING INC.				ADDRESS P.O. BOX 728, Hobbs, N.M. 88240			
REPORT OF	FIRE	BREAK	SPILL XX	LEAK	BLowOUT	OTHER*	
TYPE OF FACILITY	CREG WELL	FRDG WELL	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	Emergency Pit
NAME OF FACILITY	Myers Langlie Mattix Unit, Central Tank Battery						
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				SEC.	TWP.	RGE.	COUNTRY
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK	10 miles south of Eunice						
DATE AND HOUR OF OCCURRENCE	6/11/85 5:00 AM			DATE AND HOUR OF DISCOVERY	6/11/85 5:00 AM		
WAS IMMEDIATE NOTICE GIVEN?	YES	NO XX	NOT RE- QUIRED	IF YES, TO WHOM			
BY WHOM	DATE AND HOUR						
TYPE OF FLUID LOST	Oil - BSW, Inj. water			QUANTITY OF LOSS	320	VOLUME RE- COVERED	300
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Lightening knocked out injection pumps; injection tanks ran over to pit. Pit ran over.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Most damaged area confined to inside tank battery, 100 x 300' area outside fence.							
DESCRIPTION OF AREA	FARMING	GRAZING XX	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM XX	CLAY	ROCKY	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Cloudy.							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED -	W. B. Ehr			TITLE	Dist. Opr. Mgr.		DATE 6/18/85
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.				ADDRESS P.O. Box 728, Hobbs, N.M. 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XX	BLowOUT	OTHER*	
TYPE OF FACILITY	LARG WELL	PROD WELL	TANK CITY	PIPE LINE XX	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	N.M. "N" & "CG" Satellite trunk line.						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 25	TWP. 17	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK	1/2 mile Southwest of Buckeye						
DATE AND HOUR OF OCCURRENCE	Early A.M. 6/22/85			DATE AND HOUR OF DISCOVERY	9:00 AM 6/22/85		
WAS IMMEDIATE NOTICE GIVEN?	YES XX	NO	NOT REQUIRED	IF YES, TO WHOM	Written NMOCB		
BY WHOM	H.A. Nivens			DATE AND HOUR	6/22/85		
TYPE OF FLUID LOST	Crude oil and produced water			QUANTITY OF LOSS	35 bbl.wtr.	VOLUME RE-COVERED	25 bbl.oil 22 bbl.oil
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Internal corrosion caused hole in 2" trunkline. Replaced 4 jts. line pipe. Installed check.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Pasture land 20' x 75'. Recovered all fluids possible. Covered with sand.							
DESCRIPTION OF AREA	FARMING	GRAZING XX		URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	XX	CLAY	ROCKY XX	WET -	DRY XX
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
75° - dry							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	W. B. Lehr			TITLE Dist.Opr. Mgr.		DATE 7/2/85	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSENTATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR	Texaco Inc.				ADDRESS P.O. Box 728, Hobbs, N.M. 88240		
REPORT OF	FIRE	BREAK	SPILL	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	FRD WELL XX	DATA BETTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*

NAME OF FACILITY West Vacuum Unit #13

LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)	SEC. 34	TWP. 17	RGE. 34	COUNTY Lea
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DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 4 miles Southwest of Buckeye

DATE AND HOUR OF OCCURRENCE	Early A.M. 6/22/85	DATE AND HOUR OF DISCOVERY	8:30 AM 6/22/85
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WAS IMMEDIATE NOTICE GIVEN?	YES XX	NO	NOT REQUIRED	IF YES, TO WHOM WRITTEN - NMOCB
-----------------------------	--------	----	--------------	------------------------------------

BY WHOM	H.A. Nivens			DATE AND HOUR 6/22/85
---------	-------------	--	--	-----------------------

TYPE OF FLUID LOST	Crude oil and produced wtr.	QUANTITY OF LOSS	15 bbl.wtr. 48 bbl.oil	VOLUME RE-COVERED	45 bbl.oil
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DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY			
-------------------------------------	-----	-------	----------	--	--	--

IF YES, DESCRIBE FULLY\*\*

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Internal corrosion caused hole in 3" flowline. Line clamp installed.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

35' x 75' pasture land. Recovered all fluids possible. Covered with sand.

DESCRIPTION OF AREA	FARMING	GRAZING	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM XX	CLAY	ROCKY XX	WET	DRY XX	SNOW

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

75° dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

*W.B. Lehr*

TITLE Dist. Opr. Mgr.

DATE

7/2/85

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 8 - 9 - 85 Time of Occurrence: 3 a.m., xpxxx

Date Reported to USGS 8 - 9 - 85 Time Reported to USGS: 9:20 a.m., xpxxx

Location: State N.M.; County Lea

SE ¼ NW ¼ Section 5 T. 2 R. 4., N.M. Meridian

Operator: Texaco Producing Inc.

Surface Ownership: FEDERAL, INDIAN, /FEE, /STATE

Lease Number: 91-013817; Unit Name or C.A. Number Myers Langlie Mattix Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify)

Cause of Event: Electrical problems in injection station causing produced water tanks to run over, filling emergency pit and over flowing pit.

Volumes of Pollutants I. Discharged or Consumed: 50 bbls oil, 300 bbls water

II. Recovered: 50 bbls oil, 270 bbls water

Time Required to Control Event (in hours): 2 hours

Action Taken to Control the Event, Description of Resultant Damage, Clean-up Procedures, and Dates: Start up injection plant, cover up oil, haul off water and clean up effected area

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: NMOCID

Action Taken to Prevent Recurrence: Repairs to electrical system

General Remarks: None

Signature W.B. Culliam Date 8/22/85  
Title District Operations Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO PRODUCING INC.				ADDRESS P.O. BOX 728, HOBBS, NM 88240			
REPORT OF	FIRE	BREAK <input checked="" type="checkbox"/>	SPILL	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRLG WELL	FRDG WELL	TANK CITY	PIPE LINE <input checked="" type="checkbox"/>	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY SKELLY UNIT #51							
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				SEC. 22	TWP. T17S	RGE. 31E	COUNTY Eddy
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 7 3/4 mi west of Maljamar							
DATE AND HOUR OF OCCURRENCE 9/22/85				DATE AND HOUR OF DISCOVERY 9/22/85 9:30 AM			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO <input checked="" type="checkbox"/>	NOT RE- QUIRED	IF YES, TO WHOM			
BY WHOM				DATE AND HOUR			
TYPE OF FLUID LOST	Water & Oil			QUANTITY 10 oil OF LOSS 20 wtr	VOLUME RE- COVERED None		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO <input checked="" type="checkbox"/>	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Union leak. Replaced union.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Sandy, covered w/fresh sand.							
DESCRIPTION OF AREA	FARMING		GRAZING <input checked="" type="checkbox"/>	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY <input checked="" type="checkbox"/>	SANDY LOAM	CLAY	ROCKY	WET <input checked="" type="checkbox"/>	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
80° None							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED -	<i>W.B. Culver</i>			TITLE Dist. Opr. Mgr.		DATE 10/15/85	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

QUANTITY OF LOSS

The Workover Operations to add Drinkard Perforations resulted in a blowout at 12:46 P.M. on 8-12-85. The flow from the Well was put under control to Flare Pits at 6:00 P.M. on 8-14-85. The Well was killed (all flow stopped) 11:00 A.M. 8-18-85.

The volume of loss is very difficult to estimate. The first day of the blowout the Well unloaded 20-40 BBL. of 10# Brine and was flowing Gas with a slight spray of Oil. Each day following, until it was killed, the Well flowed Gas with very little Oil or Water. Each day the Well seemed to flow with decreased rate. No attempt was made to measure the Gas Rate.

Any estimate on the Quantity of Loss would vary from Individual to Individual.

*W.B. Cade*

W.B. CADE  
Dist. Opr. Mgr.

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO INC.				ADDRESS P.O. BOX 728, HOBBS, N.M. 88240				
REPORT OF	FIRE	BREAK	SPILL	LEAK	BLOWOUT	OTHER*		
					X			
TYPE OF FACILITY	CRG WELL	PROD WELL X	TANK CITY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	C.H. WEIR #7							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)	1985 FSL 660 FWL				SEC. 12	TWP. 205	RGE. 37E	COUNTY LEA
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK	1 LOCATION EAST OF GULF WARREN SKAGGS PUMP, STATION							
DATE AND HOUR OF OCCURRENCE	AUGUST 12, 1985-12:45 A.M.			DATE AND HOUR OF DISCOVERY AUGUST 12, 1985-12:46 A.M.				
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED	IF YES, TO WHOM				
BY WHOM				DATE AND HOUR				
TYPE OF FLUID LOST	10 LB. BRINE & GAS			QUANTITY OF LOSS ***	VOLUME COVERED 0			
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO	X	QUANTITY				
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**								
WELL UNLOADED WORKOVER FLUID WHILE CREW WAS PREPARING TO TEST TBG. IN HOLE.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**								
GRAZING LAND SPRAYED WITH A FINE MIST OF 10 LBS. BRINE. NO CLEAN UP WAS ATTEMPTED BECAUSE IT WOULD CAUSE MORE DAMAGE THAN THE BRINE.								
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN		OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM X	CLAY	ROCKY	WET	DRY X	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**								
TEMP. 85° to 90°, CLEAR, DRY & SLIGHT WIND FROM THE SOUTHWEST.								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	W.B. Weller			TITLE DIST. OPR. MGR.			DATE 11-12-85	

\*ATTACH ADDITIONAL SHEETS IF NECESSARY

\*\*\*ATTACHED

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Producing, Inc.				ADDRESS P. O. Box 730, Hobbs, New Mex. 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK	BLowOUT	OTHER*	
				X			
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTY	PIPE LINE X	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY Lovington Paddock Unit #37							
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				SEC.	TWP.	RGE.	COUNTY
				6	16-S	37-E	Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 7 miles south of Lovington							
DATE AND HOUR OF OCCURRENCE 6-7-85				DATE AND HOUR OF DISCOVERY 6-8-85 7 A.M.			
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT RE- QUIRED	IF YES, TO WHOM			
BY				DATE			
WHOM	Hagar			AND HOUR	6-8-85	TO A.M.	
TYPE OF FLUID LOST	Water and Oil			QUANTITY OF LOSS	1- Oil 4- Water	VOLUME RE- COVERED	0
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Kids shot 22 Gun Hole in plastic line							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Covered w/sand							
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN		OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Dry and Hot							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED -	W. B. Cuth			TITLE Dist. Opr. Mgr.		DATE 12-04-85	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## N. MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.					ADDRESS Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XX	BLOWOUT		OTHER*	
TYPE OF FACILITY	CRLG WELL	FRDG WELL	TANK BTTY XX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	E. H. B. Phillips 'B'							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC. 10	TWP. 20	RGE. 37	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK					5 Miles S.E. of Monument			
DATE AND HOUR OF OCCURENCE 1:00 AM 1-13-84					DATE AND HOUR OF DISCOVERY 8:30 AM 1-13-84			
WAS IMMEDIATE NOTICE GIVEN?	YES XX	NO	NOT REQUIRED	IF YES, TO WHOM Eddy Seay				
BY WHOM	Dan Jones				DATE AND HOUR 9:45 AM	1-13-84		
TYPE OF FLUID LOST	Oil				QUANTITY OF LOSS 74	VOLUME RE-COVERED 18		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO XX	QUANTITY				
IF YES, DESCRIBE FULLY**								

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Hole came in 3" circulating line .Replaced line.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

100 yard x 50 yard  
Picked up oil, covered w/sand

DESCRIPTION OF AREA	FARMING		GRAZING XX		URBAN		OTHER*	
SURFACE CONDITIONS	SANDY XX	SANDY LOAM	CLAY	ROCKY	WET	DRY XX	SNOW	

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

50° Dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr.

DATE 1-17-84

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 1 - 31 - 84 Time of Occurrence: 7:30 a.m., p.m.

Date Reported to USGS 2 - 2 - 84 Time Reported to USGS: 1:45 p.m., p.m.

Location: State New Mexico; County Eddy

NE 1/4 SE 1/4 Section 28 T. 18 .., R. 30 .., Meridian

Operator: TEXACO, Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 91-012410; Unit Name or C.A. Number North Benson Queen Uni

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify)

Cause of Event: 1" line parted from treater to scrubber

Volumes of Pollutants I. Discharged or Consumed: 60 bbls oil, 20 bbl water

II. Recovered: None

Time Required to Control Event (in hours): 3 Hours

Action Taken to Control the Event, Description of Resultant Damage,  
*part area covered* Clean-up Procedures, and Dates: Shut off fluids, installed new joint pipe  
1-31-84

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: None

Action Taken to Prevent Recurrence: New joint pipe installed

General Remarks:

Signature [Signature] Date 2-2-84  
Title Assistant District Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 2 - 23 - 84 Time of Occurrence: 3:00 a.m., p.m.

Date Reported to USGS 2 - 23 - 84 Time Reported to USGS: 9:45 a.m., p.m.

Location: State New Mexico; County Lea

SW 1/4 SW 1/4 Section 34 T. 24 S., R. 32 #, NMDM Meridian

Operator: TEXACO INC

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 91-005247; Unit Name or C.A. Number Cotton Draw Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify) \_\_\_\_\_

Cause of Event: Permian Corp. was transporting oil from tank battery.  
While transport was loading the driver fell asleep. The tank on the  
transport filled and overflowed

Volumes of Pollutants I. Discharged or Consumed: 27 barrels

II. Recovered: 10 barrels

Time Required to Control Event (in hours): 7 hours

part area covered Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: No surface damage. Spill was contained  
in battery yard and roadway. Permian Corp. is taking care of cleanup  
procedure.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: NMOCD

Action Taken to Prevent Recurrence:

General Remarks: TEXACO INC. given credit for the 27 barrels on Permian  
Ticket No. 4270134 dated 2-22-84.

Signature [Signature] Date 3-1-84

Title Assistant District Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 3 - 17 - 84 Time of Occurrence: 7:00 a.m., p.m.

Date Reported to USGS 3 - 18 - 84 Time Reported to USGS: 9:00 a.m., p.m.

Location: State New Mexico; County Lea

SE ¼ SW ¼ Section 26 T. 26 S., R. 37 E., NM Meridian

Operator: TEXACO Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

W. H. Rhodes "B" Federal NCT-1

Lease Number: 71-030174-(b); Unit Name or C.A. Number           

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify)       

Cause of Event: Internal corrosion of 4" Trunk Line.

Volumes of Pollutants I. Discharged or Consumed: 400 BBLS. (100-Oil & 300-Water

II. Recovered: 175 BBLS. (82-Oil & 93-Water)

Time Required to Control Event (in hours): 4 Hours

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Sandy area 30' X 450'. Fluid was  
vacuumed up and fresh sand spread over area.

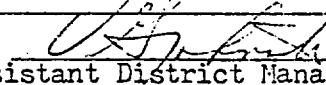
Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified:           

NMOCC

Action Taken to Prevent Recurrence: Clamp placed on Pipe.

General Remarks:                         

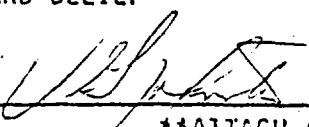
Signature  Date 3-18-84  
Title Assistant District Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO, Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK	BLOWOUT XXX	OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK BTY XX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	J. H. Moore						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 11	TWP. 25	RGE. 32	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				2 Miles South of Caprock Church			
DATE AND HOUR OF OCCURRENCE	4-23-84 Early AM			DATE AND HOUR OF DISCOVERY	4-23-84 9:30 AM		
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM	N.M.O.G.C. (Evelyn Acres)		
BY WHOM	F. Henry			DATE AND HOUR	4-24-84		
TYPE OF FLUID LOST	Crude Oil			QUANTITY OF LOSS	25 bbl	VOLUME RE-COVERED	None
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Pop-Off valve on separator stuck, causing oil to vent.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Fine spray of oil on approximately 4 acres.							
DESCRIPTION OF AREA	FARMING		GRAZING XXX	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  Dry - 75°							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED *SPECIFY				TITLE Asst. Dist. Mgr.		DATE 4-24-84	
**ATTACH ADDITIONAL SHEETS IF NECESSARY							

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P.O. Box 728, Hobbs, New Mexico 88240				
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK BTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	New Mexico "G" State							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				S E $\frac{1}{4}$ of SW $\frac{1}{4}$	SEC. 19	TWP. 19S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				Northwest of Monument 1 $\frac{1}{2}$ Miles.				
DATE AND HOUR OF OCCURRENCE 11:00 P.M. 6/21/84				DATE AND HOUR OF DISCOVERY 8:30 A.M. 6/22/84				
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM E.J. Akers				
BY WHOM	P. W. Minchew			DATE AND HOUR 6/22/84 10:20 A.M.				
TYPE OF FLUID LOST	Crude			QUANTITY OF LOSS 40			VOLUME RE-COVERED 5	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY					
IF YES, DESCRIBE FULLY**								

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Mechanical ; Test Vessel

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Roadway - Used Backhoe &amp; Fresh dirt to clean up.

DESCRIPTION OF AREA	FARMING		GRAZING XX	URBAN		OTHER*	
SURFACE CONDITIONS	SANDY XX	SANDY LOAM	CLAY	ROCKY	WET	DRY XX	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

85° F NO PRECIPITATION

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr.

DATE

6-25-84

\*SPECIFY

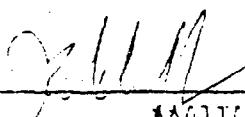
\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

NEW MEXICO OIL CONSERVATION COMMISSION  
NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS			
TEXACO, Inc.				P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL XXX	LEAK	BLowOUT	OTHER*	
TYPE OF FACILITY	OSLG WELL	PROD WELL	TANK BILLY XXX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	Central Vacuum Unit						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 36	TWP. 17-S	RGE. 34-E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				2 Miles South of Buckeye			
DATE AND HOUR OF OCCURENCE Early AM 6-19-84				DATE AND HOUR OF DISCOVERY 7-19-84 6:15 A.M.			
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM M.O.C.C. (Evelyn Akers)			
BY WHOM	F. Henry			DATE AND HOUR	6-19-84 11:07 A.M.		
TYPE OF FLUID LOST	Crude Oil			QUANTITY OF LOSS	100 Bbls.	VOLUME RE-COVERED	80 Bbls.
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Mal-Function of dump valve on free water knock out tank. Stuck open dump valve repaired.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Very wet. Lots of rain water. Oil being skimmed off							
DESCRIPTION OF AREA	FARMING		GRAZING XXX		URBAN	OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET XXX	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  72° Wet							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED			TITLE Asst.Dist. Mgr.			DATE 6-25-84	
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO, Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XX	BLOWOUT	OTHER*	
TYPE OF FACILITY	BLDG WELL	PIPE WELL	TANK CITY	PIPE LINE XX	GASO PLNT	OIL RFTY	OTHER*
NAME OF FACILITY	North Benson Queen Unit						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 28	TWP. 18S	RGE. 34E	COUNTY Eddy
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				15 Miles S.E. of Loco Hills			
DATE AND HOUR OF OCCURENCE Early AM 8-20-84				DATE AND HOUR OF DISCOVERY 8-20-84 1:30 PM			
WAS IMMEDIATE NOTICE GIVEN?	YES XX	NO	NOT REQUIRED	IF YES, TO WHOM Evelyn Akers			
BY WHOM	P. L. Humphrey			DATE AND HOUR 3:00 PM 8-21-84			
TYPE OF FLUID LOST Oil and Produced Water				QUANTITY 140 Bbl - Oil	VOLUME RE-OF LOSS 190 Bbl - Wtr	COVERED	None
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO XXX	QUANTITY			
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Leak in 4" Flow Line. Temporary repair clamp was installed. Pipe will be replaced.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Covered with fresh sand.							
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER*	
SURFACE CONDITIONS	SANDY XXX	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  Dry - No wind. 95°.							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF  SIGNED  TITLE Asst. Dist. Mgr. DATE 9-5-84							

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

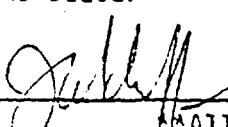
## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO, Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	FROD WELL	TANK BTRY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	North Benson Queen Unit						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 28	TWP. 18-S	RGE. 34-E	COUNTY Eddy
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				15 Miles S.E. of Loco Hills			
DATE AND HOUR OF OCCURRENCE Early AM 9-10-84				DATE AND HOUR OF DISCOVERY 9-10-84 / 8:30 AM			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED	IF YES, TO WHOM Evelyn Akers			
BY WHOM	P. L. Humphrey						
TYPE OF FLUID LOST	Oil and Produced Water			QUANTITY 100 Bbl Oil OF LOSS 120 Bbl Wtr	VOLUME RE-COVERED None		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Leak in 4" Tank line from east Sat. to Battery. Temporary repair clamp was installed. Pipe will be replaced.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Covered with fresh sand							
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN		OTHER*
SURFACE CONDITIONS	SANDY XXX	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Dry = No wind - 102°							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED <i>[Signature]</i>	TITLE Asst. Dist. Mgr.			DATE 9-12-84			
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO, Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL XXX	LEAK	BLowOUT	OTHER*	
TYPE OF FACILITY	CRDG WELL	PROD WELL	RANK BTTY XXX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY Central Vacuum Unit							
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				SEC.	TWP.	RGE.	COUNTY
				36	17-S	34-E	Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 2 Miles South of Buckeye							
DATE AND HOUR OF OCCURENCE Early AM 9-25-84				DATE AND HOUR OF DISCOVERY 6:15 AM 9/25/84			
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT RE- QUIRED	IF YES, TO WHOM Evelyn Akers			
BY WHOM				DATE AND HOUR	9/25/84 7:15		
TYPE OF FLUID LOST Crude oil and produced water				QUANTITY OF LOSS	15 bbls Oil 40 bbls Water	VOLUME RE- COVERED	None
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Electrical malfunction on switch to pump.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Battery yard. Picked up all fluid possible. Covered with dirt							
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET	DRY XX	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
65° - Dry - No wind.							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED				TITLE Asst. Dist. Mgr.			DATE 9/28/84
*SPECIFY	ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.					ADDRESS P. O. Box 728, Hobbs, N.M. 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRDG WELL	PIPE XXX	TANK CITY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY Central Vacuum Well #19								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC. 30	TWP. 17-S	RGE. 35-E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 1/2 Mile east of Buckeye Store								
DATE AND HOUR OF OCCURRENCE Early AM 10-8-84					DATE AND HOUR OF DISCOVERY 9 AM 10-8-84			
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED		IF YES, TO WHOM Evelyn Akers			
BY WHOM	DATE AND HOUR 7:30 AM 10-9-84							
TYPE OF FLUID LOST	Crude oil and produced water				QUANTITY 20 OIL OF LOSS 70 H2O	VOLUME RE-COVERED APPROX -0-		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY					
IF YES, DESCRIBE FULLY**								

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in 3" flow line, emergency clamp installed, bad joint of line will be replaced.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Covered with fresh dirt by backhoe 300' x 100' area

DESCRIPTION OF AREA	FARMING		GRAZING XXX		URBAN		OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET	DRY	SNOW	

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

60° - Dry - No wind

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED - W.B. Wile

TITLE Dist Oper Mgr

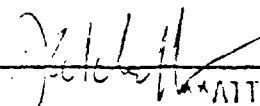
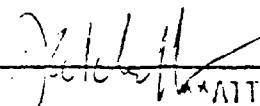
DATE 10-24-84

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR			ADDRESS					
TEXACO INC.			P. O. Box 728, Hobbs, N.M. 88240					
REPORT OF	FIRE	BREAK	SPILL XXX	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	DRIG WELL	FRUD WELL	TANK CTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* X Frac tank	
NAME OF FACILITY New Mexico "AQ" State NCT-11 #3								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC. 3	TWP. 14-S	RGE. 33-E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 5 mi. E and 10 Mi. S of Caprock								
DATE AND HOUR OF OCCURENCE 10-22-84 Early AM				DATE AND HOUR OF DISCOVERY 10-22-84 7 AM				
WAS IMMEDIATE NOTICE GIVEN?		YES XX	NO	NOT RE-QUIRED		IF YES, TO WHOM Evelyn Akers .		
BY WHOM		Larry Ridenour			DATE AND HOUR 10-22-84 9:15			
TYPE OF FLUID LOST Oil				QUANTITY OF LOSS	10 BBLs	VOLUME RE-COVERED 0		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO XX	QUANTITY				
IF YES, DESCRIBE FULLY** equilizer line stopped up and tank ran over								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** 30 x 20 covered with fresh dirt								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**								
DESCRIPTION OF AREA		FARMING	GRAZING 10 x 10		URBAN	OTHER* 10 x 20 on Location		
SURFACE CONDITIONS		SANDY	SANDY LOAM	CLAY XX	ROCKY	WET XX	DRY	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  drizzle, 45°, overcast Approximately 1" of rain last 24 hours.								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED 		TITLE Dist. Opr. Mgr.			DATE 10-22-84			
*SPECIFY  *ATTACH ADDITIONAL SHEETS IF NECESSARY								

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS			
TEXACO, Inc.				P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL XXX	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	FROD WELL	TANK CITY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Frac Tank
NAME OF FACILITY New Mexico State AQ NCT-11 #1							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC.	TWP.	RGE.	COUNTY
				3	14-S	33=E	Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 5 Miles East & 10 Miles South of Caprock							
DATE AND HOUR OF OCCURRENCE	Early AM 10-27-84			DATE AND HOUR OF DISCOVERY	10 AM 10-27-84		
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM	Evelyn Akers		
BY WHOM	Larry Ridenour			DATE AND HOUR	Tried 10/27/84 3:10 Done 10/29/84 9:00		
TYPE OF FLUID LOST	Oil/Water			QUANTITY OF LOSS	80/10	VOLUME RE-COVERED	90
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
FRAC TANK RAN OVER							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
FLUID WAS PICKED UP BY VACUUM TRUCK				50x50			
DESCRIPTION OF AREA	FARMING		GRAZING	URBAN	OTHER* ON LOCATION		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET XXX	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
Cloudy 50° light drizzle							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	W.B. Lida			TITLE Dist. Oper. Mgr.		DATE 11/7/84	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS			
TEXACO, Inc.				P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XX	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	ROD WELL	TANK BATTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Trunk Line
NAME OF FACILITY New Mexico "AE" State							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 11	TWP. 18-S	RGE. 34-E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 4 Miles S.W. of Buckeye, Store							
DATE AND HOUR OF OCCURRANCE 11/17/84 PM				DATE AND HOUR OF DISCOVERY 11/18/84 11:30 AM			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED XX	IF YES, TO WHOM Evelyn Akers			
BY WHOM	Larry Ridenour			DATE AND HOUR 11/19/84 9:00 AM			
TYPE OF FLUID LOST	Oil and Water			QUANTITY 10 Oil OF LOSS 40 Water	VOLUME RE-COVERED 5 Oil. 25 Water		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Leak in trunk line from AE Satellite to AE Battery. Leak was repaired.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Area 40x50. Vacuum truck picked up standing fluid. Fresh dirt was used to cover the area.							
DESCRIPTION OF AREA	FARMING		GRAZING XX	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY LOAM	SANDY LOAM	CLAY	ROCKY XX	WET XX	DRY	Snow
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 45° - Wind from north @ 15 MPH, soil wet due to rain previous day.							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED -	W. B. L. C.			TITLE Dist. Opr's. Mgr.		DATE 11/27/84	

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 12 - 15 - 84 Time of Occurrence: 8:00 a.m., XXXX

Date Reported to USGS 12 - 15 - 84 Time Reported to USGS: 9:00 a.m., p.m.

Location: State New Mexico; County Lea

NW 1/4 NE 1/4 Section 28 T. 25 S. R. 32 E., NMPM Meridian

Operator: TEXACO Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 91-005247; Unit Name or C.A. Number Cotton Draw Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify) Oil Spill

Cause of Event: Well made more production than anticipated

Volumes of Pollutants I. Discharged or Consumed: 25 BBLS

II. Recovered: 23 BBLS

Time Required to Control Event (in hours): Immediately

Action Taken to Control the Event, Description of Resultant Damage,  
*part area around* Clean-up Procedures, and Dates: Vacuum truck picked up oil, back hole cleaned area, covered with new dirt, affected area 40 feet by 45' on well location

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: Yes

Action Taken to Prevent Recurrence: Set another test tank

General Remarks: \_\_\_\_\_

Signature W.B. L. Date 12/19/84

Title District Operations Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 2 - 2 - 83 Time of Occurrence: 4 a.m., p.m.

Date Reported to USGS 2-3-83 Time Reported to USGS: 8 a.m., p.m.

Location: State New Mexico; County Lea

SE 1/4 NW 1/4 Section 21 T. 25 S., R. 32 E., NM Meridian

Operator: TEXACO INC.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 91-005247; Unit Name or C.A. Number Cotton Draw Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify)

Cause of Event: Dump Valves Refused to open due to water in gas Supply Lines

Volumes of Pollutants I. Discharged or Consumed: 92 BBLS.

II. Recovered: 22 BBLS

Time Required to Control Event (in hours): 4 HRS.

*part area Council* Action Taken to Control the Event, Description of Resultant Damage, Clean-up Procedures, and Dates: Switched out of problem vessel, pending repair. Pick up 22 BBLS. oil with vacuum truck and spread sand over affected area. 15' X 450' on pad and in pasture.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: NMOC

Action Taken to Prevent Recurrence: Vessel to be idled pending repair.

General Remarks: Reported to Ray Forster @ USGS 2-3-83

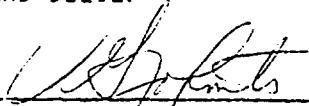
Signature [Signature] Date 2-3-83  
Title Assistant District Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL XXX	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRSG WELL	PROD WELL	TANK BTTY XXX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY West Vacuum Unit T/B							
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)					SEC. 34	TWP. 17	RGE. 34E
COUNTRY --- Lea							
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 4 Miles Southwest of Buckeye, New Mexico							
DATE AND HOUR OF OCCURRENCE 12:30 A.M. 3-14-83				DATE AND HOUR OF DISCOVERY 1:00 AM 3-14-83			
WAS IMMEDIATE NOTICE GIVEN?		YES <input checked="" type="checkbox"/>	NO	NOT RE- QUIRED	IF YES, TO WHOM Jerry Sexton		
BY WHOM		G. L. Porter					
TYPE OF FLUID LOST Produced Oil				QUANTITY OF LOSS 120 BBLS	VOLUME RE- COVERED 45 BBLS		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO <input checked="" type="checkbox"/>	QUANTITY			
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Transport driver ran tank truck over, while pumping oil from battery, for drilling purposes at the WVU #55. Immediate recovery action was taken to recover the recoverable oil and fresh dirt was used to cover that which had soaked into the ground.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Battery yard and some of the area outside.							
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER* Battery yard and directly behind	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET	DRY XXX	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 45°							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED 	TITLE Asst. Dist. Mgr.				DATE 3-15-83		

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTYYXXX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*

NAME OF FACILITY U. D. Sawyer		LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)	SEC. 34	TWP. 9	RGE. 36	COUNTY Lea
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DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK		6 Miles East of Cross Roads				
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DATE AND HOUR OF OCCURENCE 11-13-83 11:25 AM			DATE AND HOUR OF DISCOVERY 11-13-83 1:20 PM			
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WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM	Margret Beckelaw		
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BY WHOM	F. Henry			DATE AND HOUR	11-15-83 8:30 AM		
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TYPE OF FLUID LOST	Oil and Water			QUANTITY OF LOSS	600 Bbls Oil 900 Water	VOLUME RE-COVERED	250 Bbls 200 Wat
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DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY				
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IF YES, DESCRIBE FULLY**							
--------------------------	--	--	--	--	--	--	--

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
---	--	--	--	--	--	--	--

Switched out of tank Bottom of tank fell out (Big hole developed, due to corrosion)

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
---	--	--	--	--	--	--	--

Fresh dirt hauled in, covered area. Btry. yard and pasture, all possible fluids recovered

DESCRIPTION OF AREA	FARMING		GRAZING XXX		URBAN		OTHER*
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SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET	DRY XXX	SNOW
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DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							
---	--	--	--	--	--	--	--

74° dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
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SIGNED <i>J. L. Gammie</i>	TITLE District Manager			DATE 11-18-83			
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*SPECIFY //	**ATTACH ADDITIONAL SHEETS IF NECESSARY						
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NEW MEXICO OIL CONSERVATION COMMISSION  
NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLOWOUT	OTHER*	
TYPE OF FACILITY	OIL WELL	FROD WELLXXXX	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY Vacuum Grayburg San Andres Unit Well #24 Flowline							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 35	TWP. 17	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 2½ Miles S.W. Buckeye							
DATE AND HOUR OF OCCURRENCE 11-13-83 Early A.M.				DATE AND HOUR OF DISCOVERY 11-13-83 7:15 AM			
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM Eddie Seay N.M.O.C.D.			
BY WHOM H. A. Nivens				DATE AND HOUR 11-13-83 1:05 P.M.			
TYPE OF FLUID LOST Oil & Produced Water				QUANTITY 45 Bbl Oil	VOLUME RE-COVERED 40 Bbl	40 Bbl	
DID ANY FLUIDS REACH A WATERCOURSE? YES NO XXX				OF LOSS 45 Bbl Water			
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Holes in 3" Flowline due to corrosion. Line Clamps installed.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Right of way line - 30'x75'. Picked up all possible fluids. Area was a low spot with rain water standing from recent rains.							
DESCRIPTION OF AREA	FARMING		GRAZING XXX		URBAN	OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET XXX	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 53° - 6 MPH Wind - Clear -							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED	<i>J. A. Elmer</i>			TITLE District Manager		DATE 11-18-83	
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY						

NEW MEXICO OIL CONSERVATION COMMISSION,  
NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS				
TEXACO Inc.				P.O. Box 728, Hobbs, New Mexico 88240				
REPORT OF	FIRE	BREAK	SPILL XXX	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTTY XXX	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Freeze	
NAME OF FACILITY	New Mexico AN, AT, BG NCT-1 & BG NCT-2 State Tank Battery				SEC.	TWP.	RGE.	COUNTY
					22	14	33	Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 7½ miles N.E. of Warren Petro Plant								
DATE AND HOUR OF OCCURENCE	12-20-83 Early A.M.			DATE AND HOUR OF DISCOVERY	12-20-83 9:00 A.M.			
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM	Margaret Buckelew			
BY WHOM	F. Henry			DATE AND HOUR	12-21-83			
TYPE OF FLUID LOST	Oil & produced Water			QUANTITY OF LOSS	465 bbl - Wtr	VOLUME RE-	400 bbl Wt	COVERED 35 bbl Oil
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY					
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**								
Separator, Treater & Gun Barrel System (Prod) frozen								

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**								
Battery Yard & Pasture				Picked up all fluids possible and covered with fresh dirt.				
DESCRIPTION OF AREA		FARMING		GRAZING XXX		URBAN		OTHER*
SURFACE CONDITIONS		SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET	DRY	SNOW XXX

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**								
10° Wind 10 MPH								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								

SIGNED

TITLE Assistant District Mgr. DATE 12-29-83

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.				ADDRESS P.O.Box 728, Hobbs, New Mexico 88240				
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRG WELL	PROD WELL X	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY West Vacuum Unit Well # 13								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC. 17	TWP. 34	RGE. 17	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 3 Miles S.W. of Buckeye								
DATE AND HOUR OF OCCURRENCE 1-3-81 2:00 PM				DATE AND HOUR OF DISCOVERY 1-3-81 2:30 PM				
WAS IMMEDIATE NOTICE GIVEN?		YES	NO	NOT REQUIRED X	IF YES, TO WHOM			
BY WHOM				DATE AND HOUR				
TYPE OF FLUID LOST Oil & Water				QUANTITY OF LOSS 10 BO 20 BW			VOLUME RE-COVERED 10Bo 9BW	
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**								
Leak in 3" Steel Flow Line, Due to corrosion.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**								
Picked up all fluid possible, covered with fresh dirt.								
DESCRIPTION OF AREA		FARMING	GRAZING X	URBAN	OTHER*			
SURFACE CONDITIONS		SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**								
50°								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	TITLE Asst. Dist. Mgr.						DATE 1-4-82	
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY							

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco, Inc.				ADDRESS P.O. Box 728, Hobbs, N.M. 88240			
REPORT OF	FIRE	BREAK	SPILL XXX	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTTY XXX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY N.M. Q & T Batt.							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 25	TWP. 17	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK $\frac{1}{2}$ " S.W. Buckeye							
DATE AND HOUR OF OCCURRENCE 1-15-82 Early A.M.				DATE AND HOUR OF DISCOVERY 1-15-82 7:10 A.M.			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED XX	IF YES, TO WHOM			
BY WHOM				DATE AND HOUR			
TYPE OF FLUID LOST Crude Oil				QUANTITY OF LOSS 10 bbl.	VOLUME RE-COVERED 5 bbl.		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO XXX	QUANTITY			
IF YES, DESCRIBE FULLY**							

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Valve in equalizer line partially plugged with heavy oil and emulsion causing tank to overflow.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Contained in battery yard

DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW XXX
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							

18°

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr. DATE 1-15-82

\*SPECIFY

\*/ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.				ADDRESS P.O. Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XX	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRDG WELL	FRDG WELL	TANK BTTY XX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*

NAME OF FACILITY U. D. Sawyer

LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) SEC. 34 TWP. 9-S RGE 36-E COUNTY Lea

DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 6 miles East of Crossroads

DATE AND HOUR OF OCCURRENCE 1-11-82 @ 1:30 P.M. DATE AND HOUR OF DISCOVERY 1-11-82 @ 2:00 P.M.

WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED	IF YES, TO WHOM
-----------------------------	-----	----	--------------	--------------------

BY WHOM	DATE AND HOUR
---------	---------------

TYPE OF FLUID LOST Crude oil	QUANTITY OF LOSS 20 BBLS	VOLUME RE-COVERED None
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DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY
-------------------------------------	-----	-------	----------

IF YES, DESCRIBE FULLY\*\*

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*  
3" steel line from gun barrel froze and burst

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*  
The battery yard was affected and was covered with fresh dirt.

DESCRIPTION OF AREA	FARMING	GRAZING	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XX	WET	DRY	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

5°

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr.

DATE 1-25-82

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO INC.				ADDRESS P.O. Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	FRDG WELL XXX	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY West Vacuum Unit Well No. 12							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 34	TWP. 17	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 3 mi. SW Buckeye							
DATE AND HOUR OF OCCURRENCE Early A.M. 2-28-82				DATE AND HOUR OF DISCOVERY 8:15 A.M. 2-28-82			
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, A.A. Plattsmler TO WHOM N.M.O.C.D.			
BY WHOM H.A. Nivens				DATE AND HOUR 2-28-82 9:00 A.M.			
TYPE OF FLUID LOST Oil & produced water				QUANTITY OF LOSS 2 BO, 3 BW	VOLUME RE-COVERED 0 BO, 0 BW		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Leak in flowline caused by internal corrosion. Line clamp installed.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Replaced portion of line and covered with fresh dirt.							
DESCRIPTION OF AREA	FARMING		GRAZING XXX	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET XXX	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 40°							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED			TITLE Asst. Dist. Mgr. DATE 2-28-82				
*SPECIFY	*ATTACH ADDITIONAL SHEETS IF NECESSARY						

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.				ADDRESS P.O. Box 728, Hobbs, N.M. 88240				
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRDG WELL	FROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY New Mexico 'G' State								
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				S.E. $\frac{1}{4}$ , S.W. $\frac{1}{4}$	SEC. 19	TWP. 19S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 3 Miles NW of Monument, New Mexico								
DATE AND HOUR OF OCCURRENCE 4-12-82, Early A.M.				DATE AND HOUR OF DISCOVERY 4-12-82, 9:00 A.M.				
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT RE- QUIRED	IF YES, TO WHOM Littlefield				
BY WHOM	M.P. Elmore			DATE AND HOUR 4-12-82, 1:15 P.M.				
TYPE OF FLUID LOST Crude Oil				QUANTITY OF LOSS 129	VOLUME RE- COVERED -0-			
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Tank overflowed.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Battery yard & road covered with dirt.								
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 68° Dry								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED *SPECIFY	TITLE Assistant Dist. Mgr. DATE 4-12-82 *ATTACH ADDITIONAL SHEETS IF NECESSARY							

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS				
TEXACO Inc.				P.O. Box 728, Hobbs, N.M. 88240				
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRG WELL	FRD WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Sat. Station	
NAME OF FACILITY	Central Vacuum Unit Sat. #3							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				Unit F	SEC. 36	TWP. 175	RGE. 34E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				1 mile southwest of Buckeye				
DATE AND HOUR OF OCCURENCE	8-2-82 Early a.m.			DATE AND HOUR OF DISCOVERY	8-2-82 7:00 a.m.			
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM	NMDCO Kim Sturgill			
BY WHOM	P. I. Strawn			DATE AND HOUR	8-2-82			
TYPE OF FLUID LOST	Produced oil and water			QUANTITY OF LOSS	40 BO 25 BW	VOLUME RE-COVERED	30 BO 10 BW	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY					
IF YES, DESCRIBE FULLY**								

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Electrical failure

Shut down transfer pump. Oil and water leaked through pop-off valve on separator.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Picked up all possible fluid with vacuum truck.  
Covered area with fresh dirt.

DESCRIPTION OF AREA	FARMING		GRAZING XXX		URBAN		OTHER* Sat. Pad	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW	

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

70% - Trace - Electrical storm

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Ass't.Dist. Mgr. DATE 8-6-82

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO U.S.A.				ADDRESS P.O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XX	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	FROD WELL	TANK BITTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Oil Gathering Trunk Line
NAME OF FACILITY Central Vacuum Unit				SAT #3			
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)				SEC. 36	TWP. 175	RGE. 34E	COUNTRY Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK				3 Miles Southwest of Buckeye			
DATE AND HOUR OF OCCURENCE 9-8-82 Unknown A.M.				DATE AND HOUR OF DISCOVERY 9-8-82 8:00 A.M.			
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT RE- QUIRED XX	IF YES, TO WHOM			
BY WHOM				DATE AND HOUR			
TYPE OF FLUID LOST Oil & Produced Water				QUANTITY OF LOSS 20 BO 20 BW	VOLUME RE- 15 BO COVERED 15 BW		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO	XX	QUANTITY			
IF YES, DESCRIBE FULLY**							

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

6" Transite pipe broke in body, between SAT #3 AND Central Vacuum Unit Battery.  
Line was dug out and replaced.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Area was covered with fresh dirt.

DESCRIPTION OF AREA	FARMING		GRAZING XX		URBAN		OTHER*
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XX	WET	DRY	SNOW

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

80° Cloudy

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Ass't. Dist. Manager DATE 9-10-82

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 9 - 8 - 82 Time of Occurrence: 8:00 a.m., p.m.

Date Reported to USGS 9 - 8 - 82 Time Reported to USGS: 10:15 a.m., p.m.

Location: State New Mexico; County Lea

NE 1/4 NE 1/4 Section 28 T. 26 S., R. 37 E., Meridian

Operator: TEXACO USA

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 91-012404; Unit Name or C.A. Number Rhodes Yates Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify)

Cause of Event: Casing Valve Left Open

Volumes of Pollutants I. Discharged or Consumed: 8 BO

II. Recovered: 0

Time Required to Control Event (in hours): 1/4

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Closed Valve, Covered with Dirt,  
9-8-82.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: NMOCB

Action Taken to Prevent Recurrence:

General Remarks:

Signature [Signature]

Date 9-8-82

Title Asst. Dist. Mgr.

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 9-28-82 Time of Occurrence: Early a.m., p.m.

Date Reported to USGS 9-28-82 Time Reported to USGS: 1:50 a.m., p.m.

Location: State New Mexico; County Lea

NE 1/4 SW 1/4 Section 15 T. 25 S., R. 32 E., Meridian

Operator: TEXACO USA

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 91-005247; Unit Name or C.A. Number Cotton Draw Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify)

Cause of Event: Copper Tubing line broke on sampler (LACT)

Volumes of Pollutants I. Discharged or Consumed: 50 BO

II. Recovered: 25 BO

Time Required to Control Event (in hours): 1/4 Hrs.

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Replaced Line. Picked up 25 Bbls  
with Vac Truck. Cover with dirt

Cause and Extent of Personnel Injury: NONE

Other Federal, State, and Local Governmental Agencies Notified:

OCD

Action Taken to Prevent Recurrence: Replaced Line.

General Remarks: *[Signature]*

Signature *[Signature]* Date 9-28-82

Title Assistant District Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.					ADDRESS P.O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL XX	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTYYXX	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY MITTIE WEATHERLY								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) NE $\frac{1}{4}$ NW $\frac{1}{4}$					SEC. 17	TWP. 21S	RGE. 37E	COUNTY LEA
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 5 MILES WNW EUNICE NEW MEXICO								
DATE AND HOUR OF OCCURRENCE 10-5-82 1:00 AM				DATE AND HOUR OF DISCOVERY 10-5-82 10:00 AM				
WAS IMMEDIATE NOTICE GIVEN?		YES X	NO	NOT REQUIRED		IF YES, TO WHOM		
BY WHOM ROBERT M. PARKER				DATE AND HOUR 10-5-82 2:30				
TYPE OF FLUID LOST CRUDE OIL & PROD. WATER				QUANTITY OF LOSS 25 BO, 25 BW		VOLUME RE-COVERED 20 BO, 20 BW		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO	QUANTITY				
IF YES, DESCRIBE FULLY**								

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

WATER DUMP PLUGGED ON HEATER TREATER, OVERFLOWING TANK, PICKED UP FLUID COVERED WITH DIRT.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

## BATTERY YARD

DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

CLEAR &amp; DRY

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

TITLE ASST. DIST. MGR.

DATE 10-5-82

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 11 - 11 - 82

Time of Occurrence: early a.m., p.m.

Date Reported to USGS: 11 - 11 - 82

Time Reported to USGS: 1:15 a.m., p.m.

Location: State New Mexico; County Lea

SW: SE  $\frac{1}{4}$  Section 22 T. 26, R. 37, Meridian

Operator: TEXACO Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 71-030174-(a); Unit Name or C.A. Number \_\_\_\_\_

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify)

Cause of Event: Leak in Flow Line due to corrosion

Volumes of Pollutants I. Discharged or Consumed: 10 BO

II. Recovered: None

Time Required to Control Event (in hours):  $\frac{1}{4}$  Hr.

Actions Taken to Control the Event, Description of Resultant Damage,  
*part area covered* Clean-up Procedures, and Dates: Shut well in and repaired flow line  
covered with dirt. 11/11/82

Names and Extent of Personnel Injury: None

Offices Federal, State, and Local Governmental Agencies Notified:

OTC

Actions Taken to Prevent Recurrence: Repaired line

General Remarks: *[Signature]*

Signature *[Signature]* Date 11/11/82

Title: Asst. Dist. Mgr.

PC: THIS USE ONLY

Date First                    Date Reported to Reston                    Event Classifi-

Date                    Date of Onsite Inspection                    Remarks

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL XX.	LEAK	BLEWOUT	OTHER*	
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Water Injection
NAME OF FACILITY	Vacuum Grayburg San Andres Water Injection						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC.	TWP.	RGE.	COUNTY
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				2½ Miles South Southwest of Buckeye			
DATE AND HOUR OF OCCURRENCE	11-15-82 Early AM			DATE AND HOUR OF DISCOVERY	11-15-82 6:45 AM		
WAS IMMEDIATE NOTICE GIVEN?	YES XXX	NO	NOT REQUIRED	IF YES, TO WHOM N.M.OCD			
BY WHOM	G. Henry			DATE AND HOUR	11-16-82 1:15 PM		
TYPE OF FLUID LOST	Crude Oil			QUANTITY OF LOSS	185 BO	VOLUME RE-COVERED	155 BO
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO XXX	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Water Supply well failed to shut down due to electric switch failure. Tanks overflowed New Switch installed.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
Confine to facility yard.							

DESCRIPTION OF AREA	FARMING	GRAZING	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XXX	WET	DRY XXX	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*  
35°

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr.

DATE 11-16-82

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION DIVISION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240				
REPORT OF	FIRE XX	BREAK	SPILL	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRGL WELL	FROD WELL XX	FARL BITTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	New Mexico "AE" State Well #15							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				Unit G	SEC. 11	TWP. 18	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 5 Miles Southwest of Buckeye, N.M.								
DATE AND HOUR OF OCCURRENCE	7:30 AM 11-17-82			DATE AND HOUR OF DISCOVERY 7:35 AM, 11-17-82				
WAS IMMEDIATE NOTICE GIVEN?	YES	NO XX	NOT REQUIRED	IF YES, TO WHOM Written Report				
BY WHOM	DATE AND HOUR							
TYPE OF FLUID LOST	Oil & Water			QUANTITY OF LOSS	2 Bbls. Oil	VOLUME RE-COVERED		
DO ANY FLUIDS REACH A WATERCOURSE?	YES	NO XX	QUANTITY					
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Pulling 2 1/16" tbg. from 2 7/8" Csg. Tog. headed due to agitation. Floor hand placed plastic bucket over tbg. to divert flow down. Static charge built up on plastic bucket and arced to tbg. catching oil on fire and spreading to tires of pulling unit. Fire dept. put out fire on pulling unit. Oil fire burned itself out. Derrickman suffered minor burns.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** NO DAMAGE TO WELL OR PRODUCING EQUIPMENT. NO DAMAGE TO SURROUNDING AREA.								
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  44° Cloudy								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	<i>J. Welch</i>			TITLE Asst. Dist Mgr.			DATE 12-7-82	
ESPECIFY	ATTACH ADDITIONAL SHEETS IF NECESSARY							

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 1 - 13 - 81 Time of Occurrence: 5 a.m., xx:xx

Date Reported to USGS 1 - 14 - 81 Time Reported to USGS: 8:45 a.m., xx:xx

Location: State New Mexico; County Lea

NE 1/4 SW 1/4 Section 15 T. 25 S., R. 32 E., NMPM Meridian  
Operator: TEXACO Inc.

Surface Ownership: FEDERAL, XXXXX, FEE, STAKK

Lease Number: 0109-0018; Unit Name or C.A. Number \_\_\_\_\_

Type of Event: BLOOMING, FIRE, FALLING, INJURY, PROPERTY DAMAGE, OIL SPILL,  
XXXXXER XXXXL, TOXIC FLOOR XXXXL, OIL AND STAINXXXXER XXXX,  
OXX AND XDOXXC XXXXL XXXXL, SALVAGER AND TOXIC EXXXD XXXXL,  
GAS VENTING, OR OTHER (Specify) \_\_\_\_\_

Cause of Event: 2" plug valve stem assembled incorrectly. Valve  
was in open position when indicating "Closed".

Volumes of Pollutants I. Discharged or Consumed: 75 Bbls.

II. Recovered: 60 Bbls.

Time Required to Control Event (in hours): 4 Hrs.

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Vacuum truck picked up 60 Bbls.  
Covered with dirt. Confined to Battery Yard & access road.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified:  
N.M.O.C.D.

Action Taken to Prevent Recurrence: Repaired valve.

General Remarks: Valve was located approximately 10' above  
ground. Spill occurred filling new 1500 Bbls. Gun Barrel.

Signature J. M. Buff Date 1-13-81  
Title Assistant District Superintendent

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS					
TEXACO Inc.				P. O. Box 728, Hobbs, NM 88240					
REPORT OF	FIRE	BREAK	SPILL <input checked="" type="checkbox"/>	LEAK <input type="checkbox"/>	BLOWOUT <input type="checkbox"/>	OTHER*			
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK BTY <input checked="" type="checkbox"/>	PIPE LINE	GASO PLNT	OIL RFY	OTHER*		
NAME OF FACILITY Cotton Draw Unit Tank Btry No: 1									
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				NE/4	SW/4	SEC. 15	TWP. 25-S	RGE. 32-E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 35 Miles West of Jal, New Mexico									
DATE AND HOUR OF OCCURRENCE 1-13-81 AM				DATE AND HOUR OF DISCOVERY 1-13-81 8:00 AM					
WAS IMMEDIATE NOTICE GIVEN?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	NOT REQUIRED		IF YES, TO WHOM L. Slaton N.M.O.C.D.			
BY WHOM		Larry M. Lehman		DATE AND HOUR 1-13-81					
TYPE OF FLUID LOST Crude Oil				QUANTITY OF LOSS 75 Bbls.			VOLUME RE-COVERED 60 Bbls.		
DID ANY FLUIDS REACH A WATERCOURSE?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	QUANTITY					
IF YES, DESCRIBE FULLY**									
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**									
Filling newly installed gun barrel. Plug valve 10' above ground was in open position although valve stem indicated valve to be closed. Valve assembled incorrectly at factory.									
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**									
6' x 75' Btry Yard & access road. Picked up with vacuum truck & covered with fresh dirt.									

DESCRIPTION OF AREA	FARMING		GRAZING <input checked="" type="checkbox"/>		URBAN		OTHER*	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY <input checked="" type="checkbox"/>	WET	DRY <input checked="" type="checkbox"/>	SNOW	

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

48° Dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Supt. DATE 1-13-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco, Inc.					ADDRESS P. O. Box 728, Hobbs, NM 88240		
REPORT OF	FIRE	BREAK	SPILL	LEAK <input checked="" type="checkbox"/>	BLOWOUT	OTHER*	
TYPE OF FACILITY	BRG WELL	PROD WELL X	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*

NAME OF  
FACILITY Central Vacuum #132

LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) 1 mi. E of  
TER SECTION OR FOOTAGE DESCRIPTION Buckeye Store SEC. 30 TWP. 17 RGE. 35E COUNTY Lea

DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK

DATE AND HOUR  
OF OCCURRENCE Early a.m. 1/18/81 DATE AND HOUR  
OF DISCOVERY 8:00 a.m. 1/18/81

WAS IMMEDIATE  
NOTICE GIVEN? YES NO NOT RE-  
QUIRED IF YES,  
TO WHOM NMOCD

BY  
WHOM H. A. Nivens DATE  
AND HOUR 9:15 a.m. 1/18/81

TYPE OF  
FLUID LOST Oil & Salt water QUANTITY 6 bbl. oil  
OF LOSS 2 bbl. water VOLUME RE-  
COVERED 0

DID ANY FLUIDS REACH  
A WATERCOURSE? YES NO QUANTITY

IF YES, DESCRIBE FULLY\*\*

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in 2" flow line due to corrosion. Repaired leak.

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Covered with fresh dirt.

DESCRIPTION OF AREA	FARMING		GRAZING <input checked="" type="checkbox"/>	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY <input checked="" type="checkbox"/>	WET	DRY	SNOW <input checked="" type="checkbox"/>

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

Temperature 20° Approximately 4" snow on ground

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY  
KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Supt.

DATE 1/18/81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.					ADDRESS P. O. Box 729 Hobbs, New Mexico 88240		
REPORT OF	FIREFIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRDG WELL	PROD WELL	TANK BYTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*

NAME OF

FACILITY New Mexico 'F' State

LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) Center of E 1/2 of SE 1/4 SEC. 24 TWP. 19S RGE. 36E COUNTY Lea

DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 2 miles NW of Monument School House

DATE AND HOUR OF OCCURRENCE 1/26/81 2:30 p.m.			DATE AND HOUR OF DISCOVERY 1/27/81 10:30 a.m.			
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM L. Slaton NMODD		
BY WHOM L. N. Lehman			DATE AND HOUR 1/27/81 1:50 p.m.			
TYPE OF FLUID LOST Crude Oil & Prod. Water			QUANTITY 12 Bbls. Oil	OF LOSS 8 Bbls. Wtr	VOLUME COVERED None	
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY		

IF YES, DESCRIBE FULLY\*\*

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Overflowed thru vent line. Cleaned dump valve.

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\* Btry. Yard &amp; Pasture Land.

Covered with dirt.

DESCRIPTION OF AREA	FARMING	GRAZING X	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

62° Dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Mar.

DATE 1/28/81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK BTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY Vacuum Grayburg San Andres Unit							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 2	TWP. 18	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 2 1/2 Miles S.W. Buckeye							
DATE AND HOUR OF OCCURRENCE 1-7-81 Early AM				DATE AND HOUR OF DISCOVERY 1-7-81 7:10 AM			
WAS IMMEDIATE NOTICE GIVEN?		YES X	NO	NOT REQUIRED		IF YES, TO WHOM M.M.O.C.D.	
BY WHOM F. Henry				DATE AND HOUR	1-7-81		
TYPE OF FLUID LOST Crude Oil				QUANTITY OF LOSS	85 Bbl.	VOLUME RE-COVERED 55 Bbl.	
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY			
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**							
Oil dump valve on treater stuck in closed position. Pressure relief valve vented to atmosphere.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**							
55 Bbl. Oil picked up and covered area w/fresh dirt.							
DESCRIPTION OF AREA		FARMING		GRAZING X		URBAN	
SURFACE CONDITIONS		SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 32°							

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

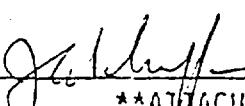
TITLE Asst. Dist. Supt. DATE 1-7-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.					ADDRESS P. O. Box 728, Hobbs, NM 88240			
REPORT OF	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> BREAK	<input type="checkbox"/> SPILL	<input checked="" type="checkbox"/> LEAK X	<input type="checkbox"/> BLOWOUT	<input type="checkbox"/> OTHER*		
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK BTBY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Crude Oil trunk line	
NAME OF FACILITY Vacuum LACT Satellite #2								
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION)					SEC. 1	TWP. 18	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 2 1/2 Miles S.W. Buckeye								
DATE AND HOUR OF OCCURRENCE 1-8-81 8:30 AM				DATE AND HOUR OF DISCOVERY 1-8-81 9:30 AM				
WAS IMMEDIATE NOTICE GIVEN?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	NOT RE- QUIRED	IF YES, TO WHOM N.M.O.C.D.				
BY WHOM	F. Henry			DATE AND HOUR 1-8-81 1:00 PM				
TYPE OF FLUID LOST Crude Oil				QUANTITY OF LOSS 350 Bbl.	VOLUME RE- COVERED 300 Bbl.			
DID ANY FLUIDS REACH A WATERCOURSE?		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	QUANTITY				
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Leak in 6" trunk line								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Picked up 300 Bbl. Oil and covered with dirt.								
DESCRIPTION OF AREA	FARMING		GRAZING X		URBAN	OTHER*		
SURFACE CONDITIONS	<input type="checkbox"/> SANDY	<input type="checkbox"/> SANDY LOAM	<input type="checkbox"/> CLAY	<input type="checkbox"/> ROCKY X	<input type="checkbox"/> WET	<input type="checkbox"/> DRY	<input type="checkbox"/> SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  38° Mist								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED *SPECIFY	TITLE Asst. Dist. Supt. DATE 1-8-81  **ATTACH ADDITIONAL SHEETS IF NECESSARY							

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR	TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, NM 88240		
REPORT OF	FIRE	BREAK	SPILL	LEAK <input checked="" type="checkbox"/>	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Flow Line

NAME OF FACILITY	West Vacuum Unit						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 33	TWP. 17	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK	3 Mi. S/SW of Buckeye						
DATE AND HOUR OF OCCURRENCE	1-6-81 2:30 PM			DATE AND HOUR OF DISCOVERY	1-6-81 3:15 PM		
WAS IMMEDIATE NOTICE GIVEN?	YES <input checked="" type="checkbox"/>	NO	NOT REQUIRED	IF YES, TO WHOM	N.M.O.C.D.		
BY WHOM	F. Henry						
TYPE OF FLUID LOST	Crude Oil			QUANTITY OF LOSS	50 Bbl.	VOLUME RE-COVERED	41 Bbl.
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO <input checked="" type="checkbox"/>	QUANTITY				

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

4" Flow line leak due to corrosion.

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Picked up 41 Bbl. Oil &amp; covered w/fresh dirt.

DESCRIPTION OF AREA	FARMING	GRAZING <input checked="" type="checkbox"/>	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY <input checked="" type="checkbox"/>	WET	DRY <input checked="" type="checkbox"/>	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

32°

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Supt. DATE 1-7-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK <input checked="" type="checkbox"/>	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRLG WELL	PROD WELL X	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY New Mexico 'BZ' State NCT-8 Well No. 12							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) SW/4 SE/4				SEC. 16	TWP. 23S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 10 Miles SE Eunice, New Mexico							
DATE AND HOUR OF OCCURRENCE 2-25-81 4:00 AM				DATE AND HOUR OF DISCOVERY 2-25-81 8:30 AM			
WAS IMMEDIATE NOTICE GIVEN?		YES <input checked="" type="checkbox"/>	NO	NOT REQUIRED		IF YES, TO WHOM L. Slaton N.M.O.C.D.	
BY WHOM Larry Lehman				DATE AND HOUR 2-25-81 1:00 PM			
TYPE OF FLUID LOST Prod. Wtr. & Crude Oil				QUANTITY 20 BW OF LOSS 5 BO	VOLUME RE-COVERED None		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO <input checked="" type="checkbox"/>	QUANTITY			
IF YES, DESCRIBE FULLY**							

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in 2" Flowline due to corrosion. Repaired leak.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Pasture land. Covered with fresh dirt.

DESCRIPTION OF AREA	FARMING		GRAZING <input checked="" type="checkbox"/>	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY <input checked="" type="checkbox"/>	SANDY LOAM	CLAY	ROCKY	WET	DRY <input checked="" type="checkbox"/>	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**							

78° Dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mar.

DATE 2-25-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, NM 88240					
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*			
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*		
NAME OF FACILITY Cotton Draw Unit Tank Btry. No. 2									
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				NE/4	NW/4	SEC. 21	TWP. 25S	RGE. 32E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 60 Miles West Jal									
DATE AND HOUR OF OCCURRENCE	3-1-81 8:00 PM			DATE AND HOUR OF DISCOVERY	3-2-81 10:00 AM				
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM	L. Slaton				
BY WHOM	Larry M. Lehman			DATE AND HOUR	1:30 3-2-81				
TYPE OF FLUID LOST	Produced Water & Oil			QUANTITY OF LOSS	100 Bbls. Wt.	VOLUME RE-COVERED	5 Bbls. Oil		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY						
IF YES, DESCRIBE FULLY**									
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Leak in Fire Tube of Heater Treater due to corrosion. Repaired Fire Tube.									
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Picked up 5 Bbls. Oil with Vacuum Truck & covered area with Sand.									
DESCRIPTION OF AREA	FARMING	GRAZING X	URBAN	OTHER*					
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET X	DRY	SNOW		
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** 52° Damp									
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF									
SIGNED				TITLE Asst. Dist. Mgr.		DATE 3-2-81			
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY								

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 3 - 1 - 81 Time of Occurrence: 8 AM, p.m.

Date Reported to USGS 3 - 2 - 81 Time Reported to USGS: 1:30 AM, p.m.

Location: State New Mexico; County Lea

NE 1/4 NW 1/4 Section 21 T. 25 S., R. 32 E., Meridian

Operator: TEXACO Inc. Cotton Draw Unit Tank Btry No. 2

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 0109-0018; Unit Name or C.A. Number \_\_\_\_\_

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify) \_\_\_\_\_

Cause of Event: Leak in Fire Tube of Heater Treater due to corrosion.

Volumes of Pollutants I. Discharged or Consumed: 210 Bbls. Oil, 100 Bbls. Wtr.

II. Recovered: 5 Bbls. Oil

Time Required to Control Event (in hours): 6 Hrs.

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Switched fluid thru test equipment,  
Vacuum truck picked up 5 Bbls. Oil, the rest soaked into sand  
& was covered with dirt. Completed 4:00 PM, 3-2-81

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified:  
N.M.O.C.D. (L. Slaton)

Action Taken to Prevent Recurrence: Repaired Fire Tube in Treater.

General Remarks:

Signature [Signature] Date 3-3-81  
Title Asst. Dist. Mgr.

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY	Vacuum Grayburg San Andres Unit Tank Battery						
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC. 2	TWP. 18	RGE. 34	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK				2 1/2 miles S.W. Buckeye			
DATE AND HOUR OF OCCURRENCE	5-8-81 Early AM			DATE AND HOUR OF DISCOVERY	5-8-81 7:00 AM		
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM	N.M.O.C.D.		
BY WHOM	F. Henry			DATE AND HOUR	5-8-81 1:15 PM		
TYPE OF FLUID LOST	Crude Oil			QUANTITY OF LOSS	200 Bbls.	VOLUME RE-COVERED	177 Bbls
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**							

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Gun barrel mal-functioned & overflowed  
 Repaired boot on syphon.

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Picked up 177 Bbls. with Vacuum Truck & covered with fresh dirt.

DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER* contained on Battery Site		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET X	DRY	SNOW	

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

62°

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

*J. J. DeLuff*

TITLE Asst. Dist. Mgr.

DATE 5-12-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.					ADDRESS P. O. Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK <input checked="" type="checkbox"/>	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK STTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Production Trunk Line	
NAME OF FACILITY	Central Vacuum Unit							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC 6	TWP 18	RGE 35	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK					1 1/2 Miles South of Buckeye			
DATE AND HOUR OF OCCURRENCE 5-29-81 During Night					DATE AND HOUR OF DISCOVERY 5-30-81 Early AM			
WAS IMMEDIATE NOTICE GIVEN?	YES <input checked="" type="checkbox"/>	NO	NOT REQUIRED	IF YES, TO WHOM Jana Ingram				
BY WHOM	P. L. Strawn			DATE AND HOUR 5-30-81				
TYPE OF FLUID LOST	Produced Oil & Water			QUANTITY OF LOSS 60 BO 95 BW	VOLUME RE-COVERED 40 BO 80 BW			
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO <input checked="" type="checkbox"/>	QUANTITY					
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Leak in 8" Transite Trunk Line Dug out line & replaced pipe								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Leak was contained within pipeline right-of-way. Vacuum truck picked up 120 Bbls. total fluid and remainder was covered w/fresh dirt.								
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY <input checked="" type="checkbox"/>	WET <input checked="" type="checkbox"/>	DRY <input checked="" type="checkbox"/>	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  82° Cloudy								
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF								
SIGNED	TITLE Asst. Dist. Manager DATE 6-3-81							
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY							

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 6 - 4 - 81 Time of Occurrence: 9:30 a.m., XX.

Date Reported to USGS 6 - 4 - 81 Time Reported to USGS: 2:00 XXX, p.m.

Location: State New Mexico; County Lea

SW 1/4 SE 1/4 Section 18 T. 19 S., R. 37 E., NMPM Meridian

Operator: TEXACO Inc.

Surface Ownership: FEDERAL, DEPARTMENT STATE

Lease Number: LC-034075; Unit Name or C.A. Number \_\_\_\_\_

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
DIE AND TOXIC FLUID SPILL, SALTEATE AND TOXIC FLUID SPILL,  
GAS VENTING, OR OTHER (Specify) \_\_\_\_\_

Cause of Event: Well unloaded while rigging up to run  
production survey.

Volumes of Pollutants I. Discharged or Consumed: 15 BO 100 BW

II. Recovered: 5 BO 75 BW

Time Required to Control Event (in hours): .75

*part area covered* Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: Install valve and pump in casing.  
Sprayed ½ acre. Picked up with vacuum truck and  
covered with fresh dirt.

Cause and Extent of Personnel Injury: \_\_\_\_\_

Other Federal, State, and Local Governmental Agencies Notified: \_\_\_\_\_  
O.C.D.

Action Taken to Prevent Recurrence: \_\_\_\_\_

General Remarks: \_\_\_\_\_

Signature J. Schaff

Date 6-4-81

Title Asst. Dist. Mgr.

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco, Inc.				ADDRESS P. O. Box 728 Hobbs, NM 82240			
REPORT OF	FIRE	BREAK	SPILL XX	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL XX	TANK BTYY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*
NAME OF FACILITY C. J. Saunders Fed. Well #2							
LOCATION OF FACILITY (QUARTER/QUAR- TER SECTION OR FOOTAGE DESCRIPTION) SW 1/4, SE 1/4				SEC.	TWP.	RGE.	COUNTY
				18	19 S	37 E	Lea
DISTANCE AND DIRECTION FROM NEAR- EST TOWN OR PROMINENT LANDMARK 5 miles North of Monument NM							
DATE AND HOUR OF OCCURRENCE 6/4/81 9:30 a.m.				DATE AND HOUR OF DISCOVERY 6/4/81 9:30 a.m.			
WAS IMMEDIATE NOTICE GIVEN?		YES X	NO	NOT RE- QUIRED	IF YES, TO WHOM J. Ingram - NMOD		
BY WHOM Michael D. Elmore				DATE AND HOUR 6/4/81 2:00 p.m.			
TYPE OF FLUID LOST Oil & Water				QUANTITY OF LOSS 15 BO 100 BW	VOLUME RE- COVERED 5 BO 75 BW		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY			
IF YES, DESCRIBE FULLY**							

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Well headed up and unloaded while rigging up to run production survey.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Installed valve and pumped in casing. Sprayed 1/2 Acre. Picked up with vacuum truck and covered with fresh dirt.

DESCRIPTION OF AREA	FARMING	GRAZING XX	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY XX	WET	DRY
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**						

65° Wet

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr.

DATE 6/5/81

\*SPECIFY  \*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240		
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*
TYPE OF FACILITY	CRG WELL	FROG WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY
				OTHER* Sat. Station # 5		

NAME OF FACILITY Central Vacuum Unit - Sat. # 5

LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)

SEC. 6 TWP. 18 RGE. 35 COUNTY Lea

DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 1 1/2 Miles South of Buckeye

DATE AND HOUR OF OCCURRENCE 6-4-81 Early AM DATE AND HOUR OF DISCOVERY 6-4-81 8:00 AM

WAS IMMEDIATE NOTICE GIVEN? YES NO NOT REQUIRED IF YES, TO WHOM Jana Ingram

BY WHOM P. L. Strawn DATE AND HOUR 6-8-81

TYPE OF FLUID LOST Produced Oil QUANTITY OF LOSS 100 BO VOLUME RE-COVERED 85 BO

DID ANY FLUIDS REACH A WATERCOURSE? YES NO QUANTITY X

IF YES, DESCRIBE FULLY\*\*

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in 3" Dump Valve on Scrubber at Sat. # 5.  
Dump Valve was replaced.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Vacuum truck picked up 85 BO

DESCRIPTION OF AREA	FARMING	GRAZING X	URBAN	OTHER* Sat. Station Pad			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET X	DRY	SNOW

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

52° Cloudy - Had rained

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Mgr.

DATE 6-10-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR	TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*		
TYPE OF FACILITY	DRG WELL	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	REMUDA BASIN UNIT							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)	NW/4 of SE/4				SEC. 24	TWP. 23 S	RGE. 29 E	COUNTY Eddy
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK	Loving, New Mexico							
DATE AND HOUR OF OCCURENCE	6-15-81 8:30 AM			DATE AND HOUR OF DISCOVERY 6-15-81 9:30 AM				
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM NMOCD (Ingram)				
BY WHOM	M. Elmore							
TYPE OF FLUID LOST	Oil & Water			QUANTITY OF LOSS	15 BO	VOLUME RE-COVERED	None	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY					
IF YES, DESCRIBE FULLY**								
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Hole in tank due to corrosion. Transferred oil & water from tank. Covered spill with dirt.								
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Covered with dirt.								
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY X	SNOW	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  80° Dry								

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Mgr.

DATE 6-24-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 7-16-81 Time of Occurrence: 8:30 a.m., p.m.

Date Reported to USGS 7-22-81 Written Report Time Reported to USGS: a.m., p.m.

Location: State New Mexico; County Lea

NE  $\frac{1}{4}$  NW  $\frac{1}{4}$  Section 21 T. 25 S., R. 32 E., NMPM Meridian

Operator: TEXACO Inc. Cotton Draw Unit TB # 2

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: 91-005247; Unit Name or C.A. Number Cotton Draw Unit

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,

SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,

OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,

GAS VENTING, or OTHER (Specify)

Cause of Event: Dump Valve on Test Separator malfunctioned.  
Oil filled vessel & Leaked out Gas Vent Line.

Volumes of Pollutants I. Discharged or Consumed: 8 Bbls.

II. Recovered: None

Time Required to Control Event (in hours): 2 Hrs.

Action Taken to Control the Event, Description of Resultant Damage,  
part area covered - Clean-up Procedures, and Dates: Battery Yard  
Covered with Dirt

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: \_\_\_\_\_

O C D - Written Report

Action Taken to Prevent Recurrence: Repaired dump valve

General Remarks: \_\_\_\_\_

Signature J. L. Elliott

Date 7-17-81

Title Assistant District Manager

FOR USGS USE ONLY

District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.					ADDRESS P. O. Box 728, Hobbs, NM 88240				
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*			
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*		
NAME OF FACILITY	Cotton Draw Unit TB # 2								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC. 21	TWP. 25-S	RGE. 32-E	COUNTRY Lea	
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK					60 miles West Jal, New Mexico				
DATE AND HOUR OF OCCURENCE 7-16-81 8:30 AM					DATE AND HOUR OF DISCOVERY 7-16-81 2:30 PM				
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED X	IF YES, TO WHOM					
BY WHOM					DATE AND HOUR				
TYPE OF FLUID LOST Crude Oil					QUANTITY OF LOSS	8 Bbls.	VOLUME COVERED	None	
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY					
IF YES, DESCRIBE FULLY**									
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**  Test Separator Dump Valve malfunctioned. Filled vessel & leaked out Gas Vent line. Covered with dirt.									
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**  Battery Yard									
DESCRIPTION OF AREA		FARMING		GRAZING		URBAN		OTHER*	
SURFACE CONDITIONS		SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	Battery Yard SION	
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**  95° Dry									

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Mgr.

DATE 7-17-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS			
TEXACO Inc.				P. O. Box 728, Hobbs, New Mex. 88240			
REPORT OF	PIPE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Production Trunk Line

NAME OF FACILITY Vacuum Grayburg San Andres Unit

LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)	SEC. 35	TWP. 17	RGE. 34	COUNTY Lea
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DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 2 1/2 Miles S.W. Buckeye

DATE AND HOUR OF OCCURENCE	7-30-81 2:00 PM	DATE AND HOUR OF DISCOVERY	7-30-81 2:20 PM
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WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED	IF YES, TO WHOM	N.M.O.C.D.
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BY WHOM	J. Henry	DATE AND HOUR	7-30-81 3:15 PM
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TYPE OF FLUID LOST	Crude Oil & Prod. Water	QUANTITY OF LOSS	10 BO 20 BW	VOLUME RE-COVERED	None
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DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY
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IF YES, DESCRIBE FULLY\*\*

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in weld due to corrosion in 4" Steel trunk line

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Covered with fresh dirt

DESCRIPTION OF AREA	FARMING	GRAZING X	URBAN	OTHER*			
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET X	DRY	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

82°

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr. DATE 8-3-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION.

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.					ADDRESS P. O. Box 728, Hobbs, NM 88240		
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*

NAME OF FACILITY New Mexico 'G' State

LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				S/2 SW/4	SEC. 19	TWP. 19S	RGE. 37E	COUNTY Lea
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DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 3 miles NW of Monument, New Mexico

DATE AND HOUR OF OCCURRENCE	8-10-81	6:00 AM	DATE AND HOUR OF DISCOVERY	8-10-81	10:00 AM	
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM Janice Ingram		
BY WHOM	Mike Elmore			DATE AND HOUR	8-10-81	2:30 PM
TYPE OF FLUID LOST	Oil			QUANTITY OF LOSS	140 Bbls.	VOLUME RE-COVERED 30 Bbls.
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY		
IF YES, DESCRIBE FULLY**						

## DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Hole in bottom of tank due to corrosion. Picked up 30 Bbls. oil.  
Covered with dirt. Cleaned tank & repaired bottom.

## DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Pasture - yard. Picked up 30 Bbls. Covered rest with dirt.

DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY X	SNOW

## DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

80° Dry

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED

TITLE Asst. Dist. Mgr. DATE 8-10-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR				ADDRESS				
TEXACO Inc.				P. O. Box 728, Hobbs, NM 88240				
REPORT OF	FIRE	BREAK	SPILL	LEAK X	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK BTTY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY C. H. Weir 'B'								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SE/4 NW/4	SEC. 11	TWP. 20 S	RGE. 37 E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 12 Miles SW Hobbs, New Mexico								
DATE AND HOUR OF OCCURRENCE 8-17-81 2:00 PM				DATE AND HOUR OF DISCOVERY 8-17-81 3:15 PM				
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED X	IF YES, TO WHOM				
BY WHOM				DATE AND HOUR				
TYPE OF FLUID LOST Crude Oil				QUANTITY OF LOSS	20 Bbls.	VOLUME RE-COVERED 18 Bbls.		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**								

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in 2" circulating line.  
Replaced 2" line.

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Battery Yard. Picked up oil & spread fresh gravel.

DESCRIPTION OF AREA		FARMING	GRAZING	URBAN	OTHER*		
					Batry Yard		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET X	DRY	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

80° Rain

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Mgr.

DATE 8-18-81

\*SPECIFY

ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR TEXACO Inc.				ADDRESS P. O. Box 728, Hobbs, NM 88240				
REPORT OF	FIRE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*		
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK BTYY X	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY	L. R. Kershaw							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION) NE/4 NW/4					SEC. 13	TWP. 20S	RGE. 37E	COUNTY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK					5 Miles SW of Monument, New Mexico			
DATE AND HOUR OF OCCURRENCE 9-11-81 Early AM				DATE AND HOUR OF DISCOVERY 9-11-81 7:00 AM				
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM Slaton				
BY WHOM	Mike Elmore			DATE AND HOUR 9-11-81 2:46 PM				
TYPE OF FLUID LOST	Crude Oil			QUANTITY OF LOSS 193 BO	VOLUME RE-COVERED 97 BO			
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY					
IF YES, DESCRIBE FULLY**								

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in tank bottom due to corrosion

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Btry yard - Picked up 97 Bbls. oil &amp; covered area with dirt

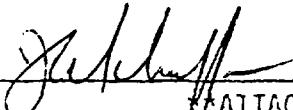
DESCRIPTION OF AREA	FARMING		GRAZING X	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

Dry 70°

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Mgr. DATE 9-22-81

\*SPECIFY

ATTACH ADDITIONAL SHEETS IF NECESSARY

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.					ADDRESS P.O. Box 728, Hobbs, NM 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK XXX	BLOWOUT		OTHER*	
TYPE OF FACILITY	CRG WELL	PROD WELL XXX	TANK BTTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER*	
NAME OF FACILITY West Vacuum Unit # 28								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)					SEC. 34	TWP. 17	RGE. 34	COUNTRY Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 3 Miles S. SW of Buckeye								
DATE AND HOUR OF OCCURRENCE 10-10-81 11:00 AM				DATE AND HOUR OF DISCOVERY 10-10-81 11:45 AM				
WAS IMMEDIATE NOTICE GIVEN?	YES	NO	NOT REQUIRED XXX	IF YES, TO WHOM				
BY WHOM				DATE AND HOUR				
TYPE OF FLUID LOST Produced Fluid				QUANTITY 2 Bbls Oil OF LOSS 20 Bbls Wtr		VOLUME RE-2 Bbls Oil COVERED 20 Bbls Wtr		
DID ANY FLUIDS REACH A WATERCOURSE?		YES	NO XXX	QUANTITY				
IF YES, DESCRIBE FULLY**								

DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN\*\*

Leak in 3" Flowline due to corrosion.

DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN\*\*

Vacuum Truck picked up all possible produced fluids and rain water.  
Line clamp installed.

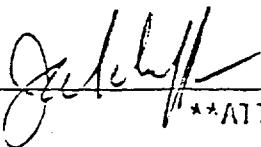
DESCRIPTION OF AREA	FARMING		GRAZING XXX	URBAN	OTHER*		
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY	WET XXX	DRY	SNOW

DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)\*\*

68° - Rain

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

SIGNED



TITLE Asst. Dist. Mgr.

DATE 10-26-81

\*SPECIFY

\*\*ATTACH ADDITIONAL SHEETS IF NECESSARY

SAMPLE REPORTING FORMAT  
(Submit in duplicate)

Subject: Report of Undesirable Event

Date of Occurrence: 10-30-81 Time of Occurrence: 9:00 a.m., p.m.

Date Reported to USGS 10-30-81 Time Reported to USGS: 3:15 a.m. (p.m.)

Location: State New Mexico; County Lea

SE 1/4 SW 1/4 Section 26 T. 26 S., R. 37 E., NMPM Meridian

Operator: Texaco Inc.

Surface Ownership: FEDERAL, INDIAN, FEE, STATE

Lease Number: LC 030174 B; Unit Name or C.A. Number \_\_\_\_\_

Type of Event: BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL,  
SALTWATER SPILL, TOXIC FLUID SPILL, OIL AND SALTWATER SPILL,  
OIL AND TOXIC FLUID SPILL, SALTWATER AND TOXIC FLUID SPILL,  
GAS VENTING, or OTHER (Specify)

Cause of Event: Transfer pump shaft broke. Tank overflowed.

Volumes of Pollutants I. Discharged or Consumed: 110 Bbls.

II. Recovered: 80 Bbls.

Time Required to Control Event (in hours): (1) One

Action Taken to Control the Event, Description of Resultant Damage,  
Clean-up Procedures, and Dates: SI wells. Replaced pump.  
Picked up 80 Bbls oil. Covered with dirt.

Cause and Extent of Personnel Injury: None

Other Federal, State, and Local Governmental Agencies Notified: \_\_\_\_\_

NMOCD

Action Taken to Prevent Recurrence: Replaced pump.

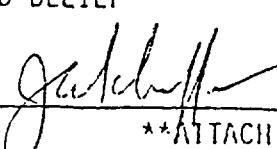
General Remarks: \_\_\_\_\_

Signature: J. Schaff Date 11-9-81  
Title Asst. Dist. Mgr.

FOR USGS USE ONLY  
District \_\_\_\_\_ Date Reported to Reston \_\_\_\_\_ Event Classifi-  
cation \_\_\_\_\_ Date of Onsite Inspection \_\_\_\_\_ Remarks \_\_\_\_\_

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR	Texaco Inc.				ADDRESS	P.O.Box 728, Hobbs, New Mexico 88240			
REPORT OF	FIRE	BREAK	SPILL	LEAK	BLOWOUT	OTHER*			
TYPE OF FACILITY	CRLG WELL	PROD WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Satellite Station		
NAME OF FACILITY	W.H. Rhodes 'B' Fed-NCT-1 East Satellite								
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)	SE <sup>1</sup> SW <sup>1</sup>				SEC.	TWP.	RGE.	COUNTY	
				26 265 37E				Lea	
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK	4 miles Southwest of Jal, New Mexico								
DATE AND HOUR OF OCCURRENCE	10-30-81 9:00 AM				DATE AND HOUR OF DISCOVERY	10-30-81 9:45 AM			
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED		IF YES,	TO WHOM NMOCD USGS Slaton			
BY	WHOM Mike Elmore				DATE AND HOUR	10-30-81 3:30 PM			
TYPE OF FLUID LOST	Oil				QUANTITY OF LOSS	110 Bbls.		VOLUME RE-COVERED 80 Bbls.	
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY						
IF YES, DESCRIBE FULLY**									
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN**									
Transfer pump shaft broke. Tank overflowed.									
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN**									
Picked up fluid and covered with dirt.									
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN		OTHER*		
SURFACE CONDITIONS	SANDY X	SANDY LOAM	CLAY	ROCKY	WET	DRY X	SNOW		
Btry yard									
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)**									
68° Dry									
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF									
SIGNED					TITLE Asst. Dist. Mgr.			DATE 11-9-81	
*SPECIFY	**ATTACH ADDITIONAL SHEETS IF NECESSARY								

## NEW MEXICO OIL CONSERVATION COMMISSION

## NOTIFICATION OF FIRE, BREAKS, SPILLS, LEAKS, AND BLOWOUTS

NAME OF OPERATOR Texaco Inc.				ADDRESS P.O. Box 728, Hobbs, New Mexico 88240			
REPORT OF	PIPE	BREAK	SPILL X	LEAK	BLOWOUT	OTHER*	
TYPE OF FACILITY	DRLG WELL	PROD WELL	TANK BTY	PIPE LINE	GASO PLNT	OIL RFY	OTHER* Water Injection
NAME OF FACILITY Vacuum Grayburg, San Andres Unit Water Injection							
LOCATION OF FACILITY (QUARTER/QUARTER SECTION OR FOOTAGE DESCRIPTION)				SEC.	TWP.	RGE.	COUNTY
				2	18	34	Lea
DISTANCE AND DIRECTION FROM NEAREST TOWN OR PROMINENT LANDMARK 3 miles South Southwest of Buckeye							
DATE AND HOUR OF OCCURENCE 11-29-81 Early AM				DATE AND HOUR OF DISCOVERY 6:45 AM 11-29-81			
WAS IMMEDIATE NOTICE GIVEN?	YES X	NO	NOT REQUIRED	IF YES, TO WHOM NMOCD			
BY WHOM H.A. Nivens				DATE AND HOUR			
TYPE OF FLUID LOST Produced water & oil				QUANTITY 230 BW OF LOSS 20 BO	VOLUME RE- 145 BW COVERED 5 BO		
DID ANY FLUIDS REACH A WATERCOURSE?	YES	NO X	QUANTITY				
IF YES, DESCRIBE FULLY**							
DESCRIBE CAUSE OF PROBLEM AND REMEDIAL ACTION TAKEN** Injection pumps lost electric power. Check valve malfunctioned allowing pressured injection system to backflow and overflow tanks.							
DESCRIBE AREA AFFECTED AND CLEANUP ACTION TAKEN** Vacuum truck picked up all possible fluid.							
DESCRIPTION OF AREA	FARMING		GRAZING		URBAN	OTHER* Station yard & road	
SURFACE CONDITIONS	SANDY	SANDY LOAM	CLAY	ROCKY X	WET	DRY	SNOW
DESCRIBE GENERAL CONDITIONS PREVAILING (TEMPERATURE, PRECIPITATION, ETC.)** Trace of rain.							
I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF							
SIGNED			TITLE Asst. Dist. Mgr.			DATE 12-4-81	
*SPECIFY  **ATTACH ADDITIONAL SHEETS IF NECESSARY							

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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

1. DR. OR EQUIP. REQUESTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Opposite Exh M  
Form C-103  
Revised 10-1

5a. Indicate Type of Lease

State

Fee

5b. State Oil & Gas Lease No.

B-1056

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name -
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>New Mexico 'Q' Stat</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>5</b>
4. Location of Well UNIT LETTER <b>O</b> FEET FROM THE LINE AND <b>2080</b> FEET FROM THE LINE, SECTION <b>25</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Vacuum Glorieta</b>
15. Elevation (Show whether DF, RT, CR, etc.) <b>3997' (GR)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
<b>Repair Water Flow</b>		<b>OTHER <input checked="" type="checkbox"/></b>	

17. 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. Rig up. Install BOP. Pull production equipment.
2. Set RBP in both strings @ 6000'. Spot 20' Sand on plugs.
3. Perforate 2 7/8" Csg String (producing) w/2-JS @ 1575', perforating both 2 7/8" Csg & 8 5/8" Csg.
4. Cement to surface through perfs. @ 1575' w/400 Sx. Class 'H' cement containing 2% CaCl. Squeeze w/add'l. 200 Sx. WOC. DOC. Test.
5. Pull RBP's. Run production equipment. Test & return to production.

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

SIGNED J.C. McElroy TITLE Asst. Dist. Mgr.

DATE 6-9-81

Orig. Signed by

Jerry Sexton

TITLE Dist. Supv.

DATE JUN 15 1981

APPROVED BY \_\_\_\_\_

DATE \_\_\_\_\_

PROVIDE FOR APPROVAL, IF ANY

NEW MEXICO  
LEA

**WELL FILE**

N.M. "Q" St.	5	6-22-81	(y) 2-7/8" @ RECOMMENDED R. & DIAL WORK: 6848 To correct surf wtrflw by (x) 2-7/8" @ Pfg & cir cmt to surf. 6850	6671 6170 PB
(y) Blinebry (x) Glorieta				
MIRU Well Units 6-22-81. POH w/prod equip. WIH w/2-7/8" RBP on 2-1/16" tbg in Glor strng. Set @ 4530'. WIH w/2-7/8" RBP on 2-1/16" tbg in Blnbry strng. Set @ 4530'. McCull WIH w/EMO pfg gun in 2-7/8" Glor strng & pfd 2-7/8" & 8-5/8" csg @ 1575' w/2 JSPI. Estab cir up 8-5/8" & 11-3/4" ann. 1 BPM @ 1500#. Halli cmted thru pf @ 1575' w/600 sx Cl H w/2% CaCl. Cmt did not cir. WOC 13 hrs. WIH w/2-5/16" blade bit on 1-5/8" DP. Drld cmt fr 1500-1600'. Tstd csg to 600# 4:30-5 PM 6-24-81. OK. Prep to pull RBP.				
No. of Days:	Est: 5 Comm: 3		Cash: Est: \$27,500 Comm: \$12,500	
<u>6/26-7/1-81</u>				
WIH w/rtrvg hd on 1-5/8" DP in (x) strng. POH w/2-7/8" RBP. WIH w/rtrvg hd on 1-5/8" DP in (y) strng. POH w/2-7/8" RBP. Ran prod equip. RDMD 6-28-81. Last 24 hrs, P/O BO, 43 BSW.				
No. of Days:	Est: 5 Comm: 5		Cash: Est: \$27,500 Comm: \$21,000	
<u>7-2-81</u>				
P/24 hrs, 1 BO, 45 BSW.				
No. of Days:	Est: 5 Comm: 5		Cash: Est: \$27,500 Comm: \$21,000	
<u>7-3/9-81</u>				
On 24 hr PT ending 8 AM <u>7-7-81</u> . P/5 BO, 11 BSW. Grav 36.8. GOR-4000. 1½" SSP. 7-84" SPM. Prod in Vacuum Glorieta 2-7/8" csg pfs 6033-6188'. Prod prior to Workover was 1 BOPD. Allow 5 BOPD.				
No. of Days:	Est: 5 Comm: 5		Cash: Est: \$27,500 Comm: \$21,000	
		<u>FINAL REPORT</u>		

**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

SUBMIT I. APPLICATION  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

**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.)

1. OIL  GAS  WELL  OTHER

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

990' FSL & 405' FEL of Section 3, T-25S, R-37E,  
Unit Letter 'P', Lea County, New Mexico.

14. PERMIT NO.

Regular

15. ELEVATIONS (Show whether DP, RT. GR. etc.)

3147' (DF)

**RECEIVED**

MAY 15 1978

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

5. LEASE DESIGNATION AND SERIAL NO.

LC-032592 (a)

6. IF INDIAN, ALLOTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C.C. Fristoe A Fed. NCT-2

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Justis Blinebry

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 3, T-25-S, R-37-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

16. 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) Plus addl. perfs in Blinebry

REPAIRING WELL  
ALTERING CASING  
ABANDONMENT

X

(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.)

1. Rigged up.
2. Set CIBP @ 6061' & spot 35' cement on plug. PBTG 6026'.
3. Squeeze csg perfs. 5375-5410' w/75 sx. Class 'C' Neat cement. Cement 2-7/8" csg annulus w/800 sx. Halliburton Lite followed by 100 sx. Class 'C' cement. Job complete 10:00 A.M., 3-11-78. WOC.
4. Perforate 2-7/8" OD csg w/2 JSPF @ 5596', 5661', 73', 5782', 86', 5804', 09', 14' & 5819'.
5. Set pkr. @ 5712'. Acidize perfs 5782-5819' w/1500 gals. 15% HCL-NE acid, 500# rock salt & 250# Benzoic Acid Flakes in 6-equal stages. Flush w/18 bbls. treated water.
6. Set RBP @ 5700' & pkr @ 5340'. Acidize perfs. 5596-5673' w/750 gals. 15% HCL-NE acid, 200# rock salt & 100# Benzoic Acid Flakes in 3-equal stages. Flush w/17 bbls. treated water.
7. Install pumping equipment. On 24 hr. potential test ending 5-9-78, well pumped 5 BO, 13 BW & GOR 1724.

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

SIGNED

TITLE Asst. District Supt.

DATE 5-12-78

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE  
MAY 15 1978

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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WELL FILE

IL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
S. State Oil & Gas Lease No.
B-1080

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Vacuum Grayburg San Andres Unit
2. Name of Operator <b>Texaco, Inc.</b>	8. Vacuum Grayburg San Andres Unit
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>55</b>
4. Location of Well UNIT LETTER <b>D</b> FEET FROM THE <b>North</b> LINE AND <b>660</b> FEET FROM THE <b>West</b> LINE, SECTION <b>1</b> TOWNSHIP <b>18-S</b> RANGE <b>34-E</b> N.M.P.M.	10. Field <b>Vacuum</b> Wildcat San Andres
15. Elevation (Show whether DF, RT, GR, etc.) <b>3998' (GR)</b>	12. County <b>Lea</b>

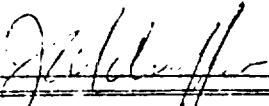
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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 OPS. <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 <b>Repair Water Flow</b> <input type="checkbox"/>	<input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>			

17. 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. Rigged Up. Pulled production equipment.
2. Set RBP @ 3800' & dump 10' sand on plug.
3. Perforate 5 1/2" Csg. w/2-JS @ 1572'.
4. Set cement retainer @ 1509'. Cemented 8 5/8" x 5 1/2" Csg Annulus w/500 sx. Class 'H' Cement containing 2% CaCl. Squeeze w/250 sx. Class 'H' Cement containing 2% CaCl. Cement Circulated. WOC. DOC. Tested Csg. Tested OK.
5. Pull RBP. Install production equipment. Test & place on production.

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

SIGNED   
TITLE **Asst. Dist. Supt.** DATE **12/12/30**

Origi. Signed 

Terry Spiegel

DEC 11 1980

DATE

APPROVED BY **DEPT. OF ENERGY** TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: **None**

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	

IL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

SA. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fan <input type="checkbox"/>
S. State Oil & Gas Lease No.	
B-1189	

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 - I" (FORM C-101) FOR SUCH PROPOSALS.

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement No.: Vacuum Grayburg San Andres Unit
2. Name of Operator Texaco, Inc.	8. Farm or Lease No.: Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No.: 23
4. Location of Well UNIT LETTER J FEET FROM THE South LINE AND 1980 FEET FROM	10. Field and Pool: <del>Vacuum</del> <del>Grayburg</del> San Andres
THE East LINE, SECTION 2 TOWNSHIP 18-S RANGE 34-E NEPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 4017' (DF)	12. County LFA

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>  REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <u>Repair Water Flow</u> <input checked="" type="checkbox"/>
ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>	

17. 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.

- Rigged Up. Pull Subm. Pump.
- Set RBP @ 3800'. Test Csg.
- Perforate 5 1/2" Csg w/2-JS @ 1670'. Set cement retainer @ 1617'.
- Cement perfs. @ 1670' w/750 sx. Class 'C' Cement containing 2% CaCl. Cement Circulated. WOC. DOC & test. Tested OK.
- Acidize open-hole 4206'-4710' w/3000 gals. 15% NE FF Acid.
- Install production equipment. Test & return to production.

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

SIGNED J. W. Klinefelter TITLE Asst. Dist. Supt. DATE 12/19/80

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF NEW MEXICO  
AND MINERS DEPARTMENT

8. OF LETTER RECEIVED	
DISTRIBUTION	
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FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fed

5b. State Oil & Gas Lease No.

B-1189

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK. IT IS A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - II" (FORM C-101) FOR SUCH PROPOSALS.)

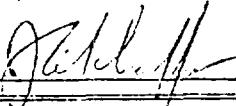
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	Vacuum Grayburg San Andres Unit
2. Name of Operator Texaco, Inc.	Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 22
4. Location of well UNIT LETTER <u>K</u> , 1980 FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM	Vacuum Grayburg San Andres Unit
THE <u>West</u> LINE, SECTION <u>2</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> MMPI.	
15. Elevation (Show whether DF, RT, CR, etc.) <u>4022'</u> (DF)	12. County Lea

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OT-ER <u>Repair Water Flow</u>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>

17. 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. Rigged Up. Pulled production equipment.
2. Set REP @ 3800' & Spot 10 sand on plug.
3. Perforate 5 1/2" Csg w/2-JS @ 7713'.
4. Set cement retainer @ 1634'. Cemented 2 5/8" x 5 1/2" Csg Annulus w/520 sx. Class 'H' Cement containing 2% CaCl. Squeezed w/250 sx. Class 'H' Cement containing 2% CaCl. Cement Circulated. WOC. DOC & retainer. Tested Cement. Tested OK.
5. Ran Production equipment. Test & return to production .

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

SIGNED   
Dated 12/12/80

TITLE Asst. Dist. Supt.

DATE 12/12/80

Signed by  
Jerry Sexton

Date 12/12/80

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_

Date 12/12/80

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

DEC 15 1980

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
OPERATOR	

*WELL FILED*  
OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1

3a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
3. State Oil & Gas Lease No.	
B-1501	

SUNDY 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 - 101" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name <b>Central Vacuum Unit</b>		
2. Name of Operator <b>TEXACO Inc.</b>	8. Form or Lease Name <b>Central Vacuum Unit</b>		
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>33</b>		
4. Location of Well UNIT LETTER <b>O</b> , FEET FROM THE <b>660</b> South LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE, SECTION <b>30</b> TOWNSHIP <b>17-S</b> RANGE <b>35-E</b> MMPL.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>		
15. Elevation (Show whether DF, RT, GR, etc.) <b>3989' (DF)</b>	12. County <b>Lea</b>		
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: <span style="float: right;">SUBSEQUENT REPORT OF:</span>			
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER _____	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <b>REPAIR WATER FLOW</b> <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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.

- RIGGED UP. PULL RODS AND PUMP. INSTALL BOP. PULL TUBING.
- SET RBP @ 3800' AND SPOT 20' SAND ON PLUG.
- PERFORATE 7" CASING W/1-JS @ 1565'.
- SET CEMENT RETAINER @ 1455'. CEMENT TO SURFACE THROUGH 7" CASING PERFS @ 1565' W/ 350 SX. CLASS H CEMENT CONTAINING 2% CACL. SQUEEZE W/ ADDL 100 SX. CLASS H CEMENT. WOC. DOC. TESTED CASING TO 500# FOR 30 MINUTES, 1:00 - 1:30 PM, 7-21-83. TESTED OK. PULL RBP.
- INSTALL PRODUCTION EQUIPMENT. TEST AND RETURN TO PRODUCTION.

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

SIGNED *Jerry Sexton*

TITLE Asst. Dist. Mgr.

DATE 9-2-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

SEP 6 1983

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY & MINERALS DEPARTMENT

NAME OF COMPANY RECEIVING	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.D.S.	
LAND OFFICE	
OPERATOR	

NEW  
OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Foreign <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>B-1306</b>
7. Unit Agreement Name <b>Vacuum Grayburg</b>
8. Vacuum Grayburg San Andres Unit
9. Well No. <b>27</b>
10. Vacuum Grayburg San Andres

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER -

11. Name of Operator

**Texaco Inc**

12. Address of Operator

P.O. Box 728, Hobbs, NM 88240

13. Location of Well

UNIT LETTER **J** FEET FROM THE **East** LINE AND **1980** FEET FROM

THE **South** LINE, SECTION **1** TOWNSHIP **18-S** RANGE **34-E** NESE.

15. Elevation (Show whether DF, RT, GR, etc.)  
**3998' (DF)**

12. County  
**Lea**

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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER <input type="checkbox"/>		Repair water flow	<input checked="" type="checkbox"/>

17. 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. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3900'. Spot 2 sx sand on plug.
3. Perforate 5½" csg w/2 JS @ 1570'. Set cement retainer @ 1409'.
4. Cement w/500 sx Class C Neat cement containing 2% CaCl.
5. Ran Temperature Survey. Top of cement 1158'. DOC & retainer. Test csg.
6. Spot 1000 gal 15% NE acid across open hole 4064-4710'.
7. Install pumping equipment. Test & place on production.

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

TITLE **Asst. Dist. Supt**

DATE **10-23-80**

SIGNED

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## WIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

NO. OF EXP-10 RECEIVED	
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OPERATOR	

WELL FILE

SUNDY NOTICES AND REPORTS OF WELLS

100-007-86 THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR P.L. 83-367 TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR S.I.C. PROPOSALS.)

- |   |                                   |   |   |
|---|-----------------------------------|---|---|
| OIL WELL <input checked="" type="checkbox"/>  | GAS WELL <input type="checkbox"/> | OTHER-<br><br>TEXACO Inc.                                       | 7. Unit Agreement Name<br>Central Vacuum Unit |
| 2. Name of Operator<br>TEXACO Inc.  |                                   | 8. Farm or Lessee Name<br>Central Vacuum Unit                   |   |
| 3. Address of Operator<br>P. O. Box 728, Hobbs, New Mexico 88240  |                                   | 9. Well No.<br>66   |   |
| 4. Location of well.<br>UNIT LETTER <u>H</u> FEET FROM THE <u>660</u> FEET FROM THE <u>East</u> LINE AND <u>1980</u> FEET FROM<br>THE <u>North</u> LINE, SECTION <u>36</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> NWPM. |                                   | 10. Field and Pool, or Wildcat<br>Vacuum Grayburg<br>San Andres |   |
| 15. Elevation (Show whether SF, RT, GR, etc.)<br>4000' (GR)   |                                   | 12. County<br>Lea   |   |

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

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"/>			COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	CASING TEST AND CEMENT JOB	<input type="checkbox"/>	Repair Casing Leak	X
OTHER _____	<input type="checkbox"/>						

17. 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. Rigged up. Pull tubing and submersible pump.
  2. Set RBP @ 3500' and spot 20' sand on plug.
  3. Perforate  $5\frac{1}{2}$ " casing W/1-JSPF @ 1560'.
  4. Set cement retainer @ 1460'. Cement to surface W/500 sx class H Cement containing 2% CACL. WOC. DOC.
  5. Tested  $5\frac{1}{2}$ " Casing to 600# for 30 minutes, 4:45-5:15 PM, 9-15-83. Tested OK.
  6. Install production equipment. Test and place on production.

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

Oct 18

Asst. Dist. Mgr.

9-29-83

9-29-82

ORIGINAL SIGNED BY JERRY SEXTON

OCT 5 1983

APPROVED BY \_\_\_\_\_ DIS

**CONDITIONS OF APPROVAL, IF ANY:**

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

NO. 34000000 RECEIVED	
DISTRIBUTION	
SANTA FE	
FILZ	
U.S.O.B.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fed <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1334	

## 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.)

1.	OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER-  TEXACO Unc.	7. Unit Agreement Name Central Vacuum Unit
2. Name of Operator				8. Farm or Lease Name Central Vacuum Unit
3. Address of Operator	P. O. Box 728, Hobbs, New Mexico 88240			9. Well No. 49
4. Location of Well	C	660	FEET FROM THE North	LINE AND 1980 FEET FROM THE West LINE, SECTION 31 TOWNSHIP 17-S RANGE 35-E NEPM.
10. Field and Paybor Wildcat Vacuum Grayburg San Andres				
15. Elevation (Show whether DF, RT, CR, etc.) 3987' (DF)				
12. County Lea				

16.		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"/>			COMMENCE DRILLING OPS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
PULL OR ALTER CASING		<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	CASING TEST AND CEMENT 'QB	<input type="checkbox"/>		<input type="checkbox"/>
OTHER				<input type="checkbox"/>	OTHER	Repair Waterflow		<input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations.)

  1. Rigged up. Pull submersible pump. Install BOP.
  2. Set RBP @ 3900' and spot 25 sx. sand on plug.
  3. Perforate 7" Csg. W/2-JS @ 1570'.
  4. Set cement retainer @ 1488'. Cement to surface W/500 Sx. Class H Cement containing 2% CaCl. Squeeze additional 100 Sx. Class H Cement. WOC. DOC. Did not hold.
  5. Set cement retainer @ 1488'. Squeezed perforations @ 1570' W/100 Sx. Class C Cement containing 2% CaCl and 500 gals. flochek and 50 addl. Sx. Class C Cement containing 2% CaCl. WOC. DOC.
  6. Tested 7" casing to 600# for 330 minutes, 3:45 - 4:15 PM, 2-8-83. Tested OK.
  7. Clean Out. Install pumping equipment. Test and return to production.

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

*W. J. Smith*

Asst Dist Mgr

3-2-83

**ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR**

PROVEN BY \_\_\_\_\_ **DISTRICT I SUPERVISOR** \_\_\_\_\_ TITLE \_\_\_\_\_

**DATE** \_\_\_\_\_

## ENERGY AND MINERALS DEPARTMENT

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OPERATOR	

WOLF FILE

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-1733

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL  GAS WELL   
OTHER -

2. Name of Operator

TEXACO Inc.

3. Address of Operator

Drawer 728, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER G . 1980 FEET FROM THE East LINE AND 1980 FEET FROM  
 THE North LINE, SECTION 1 TOWNSHIP 18-S RANGE 34-E N.M.P.M.

15. Elevation (Show whether DF, RT, CR, etc.)  
3998' (DF)7. Unit Agreement Name  
Vacuum Grayburg  
San Andres Unit8. Farm or Lease Name  
Vacuum Grayburg  
San Andres Unit9. Well No.  
4210. Field and Pool, or Wildcat  
Vacuum Grayburg  
San Andres Unit11. County  
Lea16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
 TEMPORARILY ABANDON   
 PULL OR ALTER CASING   
 OTHER \_\_\_\_\_

PLUG AND ABANDON   
 CHANGE PLANS

REMEDIAL WORK   
 COMMENCE DRILLING OPS.   
 CASING TEST AND CEMENT JOB   
 OTHER Repair Waterflow

ALTERING CASING   
 PLUG AND ABANDONMENT

17. 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. Rigged up. Pull rods and tubing.
2. Set RBP at 3800' and spot 4 sx sand on plug. Perf. 7" casing w/2-JS at 1569'.
3. Set cement retainer at 1445'. Squeezed 9-5/8" x 7" annulus with 475 sx Class "H" cement containing 2% CaCl.
4. Perf. 7" casing w/2-JS at 1385'. DOC 1460-1590'. Squeeze w/75 sx Class "H" cement
5. DOC, test and pull RBP.
6. Spot 1000 gals 15% NE acid across open-hole 4128-4690'.
7. Install pumping equipment. Test and return to production.

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

*Jackie H.*

TITLE Ass't. Dist. Supt.

DATE 11-5-80

SIGNED Sealed & Dated  
APPROVED BY 1st 10-28-80  
CONDITIONS OF APPROVAL, IF ANY

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

BLM - BLM-DOED  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2309' FSL & 2310' FEL

AT TOP PROD. INTERVAL: (Unit Letter 'J')

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON\*

(other) REpair Casing Leak

SUBSEQUENT REPORT OF:

5. LEASE

LC-061936 ✓

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

E.F. Ray 'B' Federal NCT-1

9. WELL NO.

6 ✓

10. FIELD OR WILDCAT NAME

Paduca Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 10, T-25-S, R-32-E

12. COUNTY OR PARISH

Lea

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3463' (DF)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

1. Rigged up. Install BOP.
2. Cut 7 5/8" Csg @ 7' & replace bad casing from 7' to surface.
3. Set CIBP @ 4540' & dump 40' cement on plug.
4. Ran 1-jt. 2 3/8" tubing W/pkr. & test to 500# for 30 minutes 9:30-10:00 AM, 1-17-85. Tested OK. Job complete 10:00AM, 1-17-85.
5. Pull pkr & run 1 jt. tubing in hole.
6. Remedial work completed shut-in 1-17-85.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED W.B. Esh TITLE Dist. Opr. Mgr. DATE 1-24-85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

## N.M. AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-1080

## SUNDY 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 - 103 (FORM C-101) FOR SUCH PROPOSALS.)1. OIL WELL  GAS WELL  OTHER -

2. Name of Operator

TEXACO Inc.

3. Address of Operator

P.O. Box 728, Hobbs, NM 88240

4. Location of Well

UNIT LETTER E 1980 FEET FROM THE North LINE AND 660 FEET FROM  
THE West LINE, SECTION 1 TOWNSHIP 18-S RANGE 34-E NEPR.7. Unit Agreement Name  
Vacuum Grayburg  
San Andres Unit8. Name of Lease Name  
Vacuum Grayburg  
San Andres Unit

9. Well No.

40

10. Field and Pool, or WHdce:  
Vacuum Grayburg  
San Andres11. County  
Lea15. Elevation (Show whether DF, RT, GR, etc.)  
4008' (DF)

NOTICE OF INTENTION TO:

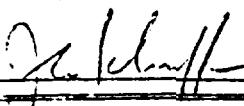
SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK PLUG AND ABANDON ALTERING CASING TEMPORARILY ABANDON PULL OR ALTER CASING CHANGE PLANS REMEDIAL WORK COMMENCE DRILLING OPS. PLUG AND ABANDONMENT OTHER CASING TEST AND CEMENT JOB OTHER Repair Water Flow & Treat 

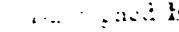
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3900'. Ran CBL Log. Top of cement 2650'.
3. Perforate 5-1/2" csg w/2 JS @ 1585'. Set cement retainer @ 1489'.
4. Cemented perfs @ 1585' w/400 sx. Class "C" Cement containing 2% CaCl. Cement circulated. WOC & DOC. Tested casing. Tested OK.
5. Acidize open hole 4076-4710' w/3000 gals. 15% NEFE Acid.
6. Install production equipment. Test & return to production.

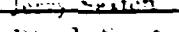
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED   
TITLE Asst. Dist. Supt.

DATE 12-2-80

APPROVED BY   
TITLE

DATE

CONDITIONS OF APPROVAL   
TITLE

DATE

## CIL CONSERVATION DIVISION

P.O. BOX 2588

SANTA FE, NEW MEXICO 87501

Form 1-10  
Revised 1-1-73

PERMIT NO.	
NAME	
STATE	
OFFICE	
BATCH	

## WELL FILE

1. Indicate Type of Lease

State Fee 

2. State Oil &amp; Gas Lease No.

## SUNDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM TO REQUEST TO DRILL OR TO APPLY FOR PLUGGING OF A WELL IN A DIFFERENT SECTION.

<input type="checkbox"/> GAS WELL	<input type="checkbox"/> OIL WELL	Water Injection Well	7. Unit Agreement Name <b>Skelly Penrose A Unit</b>
Operator <b>Texaco Producing, Inc.</b>			8. Former Lease Name
at Operator P.O. Box 728, Hobbs, N.M. 88240			9. Well No. <b>42</b>
10. Well SECTION <b>B</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM			10. Field and Free, or Wildcat <b>Langlie Mattix</b>
ELEVATION <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM			
EAST <b>10</b> SECTION <b>10</b> TOWNSHIP <b>23S</b> RANGE <b>37E</b> UTM			
11. Elevation (Show whether DF, RT, CR, etc.) <b>3206 DF</b>			12. County <b>LEA</b>

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
ILT ABANDON <input type="checkbox"/>	CHANGE PLATE <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
ALTER CASING <input type="checkbox"/>	CASEING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <b>Repair Water Flow</b> <input checked="" type="checkbox"/>

See Rule 1103.

- IPU PUI 9/27/85. Flowed well to frac. tank.  
TOH with injection tubing and packer  
1/02/85 TIH with 7" CIBP to 3250'. Tested casing to 500 psi. Held ok.  
1/03/85 TIH with 1" tubing between 15 $\frac{1}{2}$ " and 8 $\frac{1}{2}$ " to 300'. Pumped 300 sacks of class "H" circulated cement.  
1/04/85 Perforated squeeze holes at 1080'. TIH with cement retainer to 975'. Pumped 175 sacks, circulated 50 sacks. Test to 500 psi, ok.  
0/07/85 TIH with bit and clean out to 1060'. Developed waterflow. TIH with cement retainer to 975'. Pumped 1000 gal. flo-check and 100 sacks class "H". Drilled out retainer and cement.  
0/10/85 Perforated at 350'. TIH with retainer to 257'. Pumped 300 sacks class "H". Drilled out retainer and cement.  
0/16/85 Ran CBL 1250-0. TIH with CIBP to 1160'. Perf 7" casing at 270'. TIH w/ retainer to 220'. Pumped 500 gal Flo-Check and 75 sacks class "H".  
0/18/85 Drill out retainer and CIBP. Returned to injection.

District Opr. Mgr.

11/21/85

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

DEC - 2 1985

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

ON OFFICE USE ONLY
DISTRIBUTION
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
OPERATOR

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease
State <input type="checkbox"/>
Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO ABANDON OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: Injection Well	7. Unit Agreement Name <b>Skelly Penrose "A" Unit</b>
2. Name of Operator <b>TEXACO PRODUCING INC.</b>	8. Farm or Lease Name
3. Address of Operator <b>P.O. BOX 728, HOBBS, NM 88240</b>	9. Well No. <b>38</b>
4. Location of well UNIT LETTER <b>N</b> , FEET FROM THE <b>740</b> FEET FROM THE <b>South</b> LINE AND <b>2000</b> FEET FROM THE <b>West</b> LINE, SECTION <b>3</b> TOWNSHIP <b>23-S</b> RANGE <b>37-E</b> BMPS.	10. Field and Pool, or Wildcat <b>Langlie Mattix / Rivers Queen</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3297' DF</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
<input type="checkbox"/> PERFORM REMEDIAL WORK	<input type="checkbox"/> REMEDIAL WORK	<input type="checkbox"/> ALTERING CASING
<input type="checkbox"/> TEMPORARILY ABANDON	<input type="checkbox"/> COMMENCE DRILLING OPS.	<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
OTHER <b>To repair waterflow</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

17. 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. Rigged up. POH w/injection equipment.
2. Set 7" CIBP @ 3250'.
3. Perforated 7" csg at 1225' w/2 holes.
4. Set 7" retainer 1100'. Established cir out the bradenhead using produced water.
5. Cmtd the 7" - 8-5/8" casing annulus w/150 sx C1 "H" cmt.
6. Stung out of retainer and cir out excess cmt. WOC 24 hours.
7. Drilled rtrn and cmt to top of CIBP @ 3250'.
8. Drilled out 7" CIBP and C/O 7" csg to top of liner at 3296'.
9. C/O 5", 13# csg to PBTD (3628').
10. TIH w/injection tbg & pkr to - 3327' and returned to injection.

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

*w.b. ldr*

SIGNED **Eddie W. Seay** TITLE **District Operations Manager** DATE **09-05-85**

Eddie W. Seay

SEP 10 1985

APPROVED BY **W.B. LDR** TITLE **Manager, O&G**

CONDITIONS OF APPROVAL, IF ANY:

**'WELL FILE**  
**PERSONAL AND CONFIDENTIAL**

Form PO-32

**DAILY DRILLING REPORT**

Page 19

Hobbs District-Midland Division

As of 7 A.M. DECEMBER 11, 1985

LEA

SKELLY PENROSE "A" UNIT WELL NO. 38 (WI .8591935%) 74.124%

(EXP)

TD: 3630'

CSG: 5" SET @ 3629'

RRW: C/O OH & A/  $\frac{5}{4} \frac{1}{2}$  Brd. in d.

W/O COMMENCED: 11-13-85

EST NO. 5-3928, EST DAYS: 9 COMM - 13

EST CASH: \$44,000 COMMITTED: \$57,000

12-5/12-11-85

ON 24 HR INJ ENDING 9:30 AM 12-10-85] INJ'G 390 BWPD @ 1650#. LANGLIE MATTIX PRFS FR 3520-3621'. INJ PRIOR TO W/O 250 BWPD @ 1600#. FINAL REPORT

*E* JPI 85.92%

SUBSEQUENT OPERATION REPORT

HOBBS DISTRICT *Unice* AREA

WORKOVER COST \$48,974 PAYOUT OCB Reg.

*WIN*

*Est. # 5-3928*

J-24

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTOIL RESERVATION DIVISION  
P. O. BOX 2086  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

NO. OR DATE RECEIVED	
TYPE OF OPERATION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

## SUNDY NOTICES AND REPORTS ON WELLS

THIS FORM IS FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SURE PROPOSALS.)

IL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- WATER INJECTION WELL	7. Unit Agreement Name <b>Skelly Penrose A Unit</b>
THE OWNER OF		xaco Producing Inc.	8. Farm or Lease Name
ADDRESS: P.O. BOX 728, Hobbs, NM 88240		9. Well No. <b>13 NEW</b>	10. Field and Pool, or Unit <b>Langlie Mattix Seven Rivers Queen</b>
WELL LETTER <b>B</b>	FEET FROM THE LINE AND <b>2310</b>	FEET FROM THE LINE AND <b>2310</b>	11. County <b>Lea</b>
LINE, SECTION <b>3</b>	TOWNSHIP <b>23S</b>	RANGE <b>37E</b>	NMPS.
15. Elevation (Show whether DF, RT, GR, etc.) <b>3304' DF</b>			16. Subsequent Report of:

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

ITEM NUMBER	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
ORIGINALLY ABANDONED <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	<input type="checkbox"/>
OTHER <input type="checkbox"/>	<input type="checkbox"/>	OTHER <input type="checkbox"/>	<input type="checkbox"/>

DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FILE 103.

MIRU Pulling Unit.

POOH with injection equipment.

TIH with packer and plug tes 7" production csg.

Found holes in 7" csg from 372' to 930'.

POOH with packer and plug

Set CIBP at 2713

Pump 340 sx Class C cmt w/2% CaCl<sub>2</sub> through 7" csg holes circ. 25 sx cmt to surface.

Tag top of cmt at 206' POOH shut-in well, waiting on approval to plug and abandon.

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

Jerry SEXTONORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR

TIONS OF APPROVAL, IF ANY

TITLE District Admin. Supervisor

DATE 10/02/86

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

OCT 8 1986

NEW MEXICO
DEPARTMENT
REGISTRATION
EXPLORATION
PRODUCTION
OFFICE
XACO

**OIL CONSERVATION DIVISION**  
P. O. BOX 2086  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

3a. Indicate Type of Lease
State <input type="checkbox"/>
Fee <input checked="" type="checkbox"/>
3b. State Oil & Gas Lease No.

**SUMMARY NOTICES AND REPORTS ON WELLS**

Use this form for notices to wells or for reports of wells to the State Oil & Gas Conservation Commission.

Use application for permit if you have such applications.

3c) <input type="checkbox"/> GAS WELL      OTHER: Water Injection	7. Unit Agreement Name <b>Skelly Penrose A Unit</b>
CONTRACTOR <b>XACO PRODUCING INC.</b>	8. Form of Lease Name <b>Skelly Penrose A Unit</b>
Operator <b>O. BOX 728, HOBBS, N.M. 88240</b>	9. Well No. <b>32</b>
10. Well LINE SECTION <b>L 1980</b>	10. Field and Fees, or Wildcat <b>Langlie Mattix Seven Rivers Queen</b>
FEET FROM THE <b>PEEFT FROM THE</b>	LINE AND <b>South 660 FEET FROM</b>
TOWNSHIP <b>West 1980 4</b>	RANGE <b>23S 37 EQUW.</b>
11. Elevation (Show whether DF, RT, GR, etc.) <b>15. Elevation (Show whether DF, RT, GR, etc.)</b>	12. County <b>Lea</b>

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

**NOTICE OF INTENTION TO:**

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CHANGE PLATE <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
	Repaired csg. leak <input checked="" type="checkbox"/>	

Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operation.)

EE RULE 1102.

Rigged up POH w/Injection equipment.

Set pkr. at 2907'. Lkg at ret. Set cmt ret at 2847'. Sqzd 5 1/2" csg fr 3006' 3036' w/200 sx "H" w/.5% Halad 9 and 100 sx cl "H" w/2% CaCl. Tag cmt ret at 2847'. Sqz 5 1/2" csg from 3006-3036' w/100 sx cl "H" w/2% CaCl and 850 gal Flochek. Pld out of ret. Rev. 20 sx cmt and 420 gal Flochek to pit.

Drilled 121' cmt from 3500-3549'.

PSA 3978'. A/5 1/2" csg. Perf 3560-3643' w/4000 gal 15% NEFE, 2% Pentafax, 1000# RK SLT in 4 stages.

TIH w/injection equipment. Loaded annulus w/inhibited wtr. Test and place on production.

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

*W.B. Lish*

Title Dist. Opr. Mgr.

Date 9/23/85

STATE	NEW MEXICO
PERMIT NO.	1
REC'D.	1
OFFICE	1
AREA	1

# OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
revised 10-1-77

3a. Indicate Type of Lease
State <input type="checkbox"/>
Fees <input checked="" type="checkbox"/>
3b. State Oil & Gas Lease No.

## SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO RELOCATE OR PLUG BACK TO A DIFFERENT RESERVOIR.

USE "APPLICATION FOR PERMIT TO DRILL C-101" FOR SUCH PURPOSES.

<input type="checkbox"/> GAS WELL	<input type="checkbox"/> OTHER	Water Disposal	7. Unit Agreement Name
Operator Texaco Inc.			8. Form of Lease Name U.D. Sawyer
1st Operator P.O. Box 728, Hobbs, NM 88240			9. Well No. 3
at well LINES I 2310 FEET FROM THE South LINE AND 990 FEET FROM			10. Field and Pool, or Wildcat Crossroads Devonian
EAST 34 TOWNSHIP 9S RANGE 36E SURP.			
11. Elevation (Show whether DF, RT, CR, etc.) 4030' DE			12. County Lea

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

### NOTICE OF INTENTION TO:

### SUBSEQUENT REPORT OF:

CHAMBER WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
ILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
STER CASING <input type="checkbox"/>	<input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	<input type="checkbox"/>
		OTHER <input type="checkbox"/>	

Do Proposes or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed). SEE RULE 1103.

1. Rigged up. Installed BOP.
2. Attempted to fish parted 3 1/2" tbg & 5 1/2" csg with 24 hour a day drilling rig. Efforts were unsuccessful & verbal permission to P&A was received from the Hobbs NMOCD District Office.
3. Ran 8 5/8" pkr. Spotted w/ 265 sx class "H" cmt 1750-805'. Circ. out 12 sx. cmt.
4. Ran DP to 805' and spotted 265 sx. class "H" cmt. plug 805' to surf. Circ. out 15 sx. cmt. plug and abandoned.

I, the person above is true and complete to the best of my knowledge and belief.

J. G. L. M.

TITLE

Dist. Oper. Mar.

September 12, 1986

Jack Griffin

OIL & GAS INSPECTOR

JUL 18 1986

## DEPARTMENT

NO. OF COPIES RECEIVED	
OIL & GAS SECTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

## CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease

State Fax 

3. State Oil &amp; Gas Lease No.

## SUNDY NOTICES AND REPORTS C. WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DRILL ON TO SPOILED OR OLD TERRAIN OR TO A DIFFERENT RESERVOIR.)

OIL WELL  G/A WELL  OTHER 

Name of Operator

Texaco Inc.

Address of Operator

P. O. Box 728, Hobbs, NM 88240

Location of well

UNIT LETTER G . 1650 FEET FROM THE East LINE AND 1980 FEET FROMTHE North LINE. SECTION 11 TOWNSHIP 20-S RANGE 37-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3609' DF

10. Field and Pool, or Wildcat  
Skaggs Glorieta, Skaggs Dryard Weir Blinebry East

11. County

LEA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

APPROVED FOR WORK

TEMPORARILY ABANDON

RE-ENTER OR ALTER CASING

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

CASING TEST AND CEMENT JOBS

OTHER

Describe Proposed or Completed Operations (Clearly state all pertinent details and give pertinent dates, including estimated date of starting any proposed work) SEE PAGE 103.

- MIRUPU, Kill well TOH w/ rods and pump. Install BOP, TOH w/ 2 3/8" tbg. @ 5316'.
- Load hole w/ water. Repair 5 1/2" flange and install 2" bradenhead, riser and valve.
- By wireline, set CIBP @ ± 1500'. TIH w/ csg. gun and shoot 2 squeeze perfs @ 1440'.
- TIH w/ cmt. retainer and set @ ± 1350' (csg. was tested to 1000# for 30 mins. in April, 1986 and held). Load backside. Establish rate into perfs and attempt to circulate to surface. Pump 400 sxs. class "H" cmt. (50% excess) w/ 2% CaCl2 into perfs. Pull out of retainer and circulate tbg. clean. Squeeze bradenhead w/ 25 sxs. TOH. WOC.
- TIH w/ bit and drill out retainer and cmt. to CIBP. Close BOP and pressure test squeezed perfs to 1000#. If necessary, resqueeze w/ 100 sxs. Drill CIBP and TOH.
- TIH w/ 2 3/8" production tbg. Remove BOP. TIH w/ pump and rods. POB. RDPU.

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

J.W. Browning

TITLE Dist. Admin. Supervisor

DATE 11-17-86

ORIGINAL SIGNED BY JERRY TEXTON  
DISTRICT 1 SUPERVISOR

DATE NOV 26 1986

NOTICES OF APPROVAL, IF ANY

STATE OF NEW MEXICO  
MINES AND MINERALS DEPARTMENT

No. of Copies Required	
DISTRIBUTION	
SANTA FE	<i>1st flr</i>
FIRE	<i>1st flr</i>
U.S.G.S.	<i>AN</i>
LAND OFFICE	
OPERATOR	

CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

8. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
9. State Oil & Gas Lease No.
B-155-1

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 TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

Name of Operator

TEXACO Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER H FEET FROM THE North LINE AND 560 FEET FROM  
THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E N.M.P.M.

7. Unit Agreement Name

8. Farm or Lease Name

N.M. '0' St. NCT-1

9. Well No.

18

10. Field and Post, or Wilson:  
Vacuum Penn  
Vacuum Wolfcamp.

15. Elevation (Show whether DF, RT, CR, etc.)  
4005' (DF)

12. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

EXERCISE REMEDIAL WORK   
TEMPORARILY ABANDON   
ULL OR ALTER CASING

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

CASING TEST AND CEMENT JOBS

OTHER Repair Waterflow

1. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEC RULE 1103.

1. Rigged up.
2. Set RBP in Wolfcamp @ 5000'. Log well.
3. Squeeze 13-3/8" x 9-5/8" casing annulus w/850 sx. Class 'C' cement containing 2% CaCl. Ran Temperature Survey. Cemented 1800' to surface.
4. Install pumping equipment. Test and place on production.

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

John Runyan  
Geologist

TITLE Asst. District Supt.

DATE 9-19-80

APPROVED BY \_\_\_\_\_  
TITLE \_\_\_\_\_

DATE SEP 23 1980

DEFINITIONS OF APPROVAL, IF ANY.

## ENERGY AND MINERALS DEPARTMENT

No. of Casing Received	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

*Wells*      *File*

NATIONAL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. <b>B-1306-1</b>	
7. Unit Agreement Name -	
8. Farm or Lease Name <b>N.M. 'R' St. NCT-1</b>	
9. Well No. <b>9</b>	
10. Field and Pool, or Block <b>Vacuum Glorieta</b>	
11. County <b>Lea</b>	

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OCCLUDE OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL  GAS WELL  OTHER -

2. Name of Operator

**TEXACO Inc.**

3. Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER **G**, 1650 FEET FROM THE **North** LINE AND 1980 FEET FROM  
THE **East** LINE, SECTION **6** TOWNSHIP **18-S** RANGE **35-E** NMPM.

15. Elevation (Show whether DF, RT, CR, etc.)  
**3983' (DF)**

12. County  
**Lea**

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

**NOTICE OF INTENTION TO:**

**SUBSEQUENT REPORT OF:**

PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASINGS

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CASING TEST AND CEMENT JOBS

OTHER \_\_\_\_\_

OTHER **Repair Waterflow & Treat**

17. 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. Rigged up. Pull rods and pump. Install BOP. Pull tubing.
2. Back off & pulled from 1300'. Set inflatable BP @ 1270' & pkr. @ 1189'.
3. Squeezed 11-3/4" csg w/300 sx. Class 'C' cement containing 3% CaCl & 5# Gilsonite plus 1/4# Flocele per sx. WOC. DOC. Tested OK.
4. Screw back into tbg @ 1300' w/4 perfs @ 1295'. Set RBP @ 5000'.
5. Squeeze 11-3/4" - 2-7/8" csg annulus from 1300'-surface w/600 sx Class C cement containing 3% CaCl. WOC.
6. Squeeze perfs @ 1295' w/300 sx Class 'C' cement containing 2% CaCl & 75 bbls. Flocek. WOC. DOC. Tested OK.
7. Install pumping equipment. Test and place on production.

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

*Jack Schaff*

TITLE **Asst. District Supt.**

DATE **9-12-80**

APPROVED BY **John H. Schaff**

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL: **MANVI**

**SEP 15 1980**

NO. OF COPIES REQUESTED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

# CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fan

5b. State Oil & Gas Lease No.

B-1056

## SUNDY 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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER -

Name of Operator

TEXACO Inc.

Address of Operator

P.O. Box 728, Hobbs, NM 88240

Location of Well

UNIT LETTER J FEET FROM THE South LINE AND 2100 FEET FROM  
THE East LINE, SECTION 25 TOWNSHIP 17-S RANGE 34-E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)

3998' (GR)

10. Field and Pool, or Wildcat

Vacuum Glorieta

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

ALTERING-GASING

TEMPORARILY ABANDON

REMEDIAL WORK

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

OTHER \_\_\_\_\_

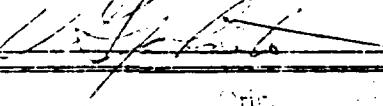
CASING TEST AND CEMENT JOB

OTHER Repair Waterflow

7. 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. Rigged up. Pull pump & rods & tubing.
2. Set RBP in Glorieta string @ 4000'. Set RBP in Blinebry string @ 4000'.
3. Perf. 2-7/8" Blinebry casing w/4 JS @ 1630'. Squeeze perfs. @ 1630' w/360 sx. Class "C" cement containing 2% CaCl. Squeeze 160 sx. Class "C" cement down 8-5/8" - 2-7/8" csg. annulus. WOC. DOC & test. Tested OK.
4. Moved Glorieta RBP to 6060'. Acidize Glorieta perfs. 6018-6050' w/6000 gals. 20% NE acid in 3 equal stages using 400# rock salt after stages 1 & 2.
5. Pull RBP's. Install pumping equipment. Test & place on production.

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

SIGNED  TITLE Asst. Dist. Supt. DATE 10/10/80

APPROVED BY John G. ... TITLE Asst. Dist. Supt. DATE 10/10/80

CONDITIONS OF APPROVAL, IF ANY None

DIVISION OF OIL AND GAS	
DATE RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

**CONSERVATION DIVISION**  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

*Well File*

Form C-103  
Revised 10-1-78

6a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-155	

**SUNDRY NOTICES AND REPORTS ON WELLS**

(DO NOT USE THIS FORM FOR REPORTS TO DRILLING PERMITS OR FOR PAYMENT OF A DIFFERENT RESERVE.

OIL WELL  GAS WELL  OTHER

Name of Operator

EXACO Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER J 2090 FEET FROM THE South LINE AND 2086 FEET FROM  
THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E MMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3990' (GR)

7. Unit Agreement Name

8. Form of Lease Name

N.M. 'O' St. NCT-1

9. Well No.

25

10. Field and Pool, or Wildcat

Vacuum Glorieta

11. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

REPAIR REMEDIAL WORK   
TEMPORARILY ABANDON   
ALTER CASING

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

CASING TEST AND CEMENT JOB

OTHER Repair Waterflow

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.

- Rigged up. Pulled rods, pump and tbg. Install BOP.
- Log well. Set RBP @ 5008'.
- Squeeze TI-3 1/4" - 8-5/8" casing annulus w/600 sx. Class 'C' cement containing 2% CaCl. WOC & test. Tested O.K.
- Install pumping equipment. Test and return to production.

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

Oriz. Signed

Moved by  Jerry SAWYER

EDITIONS OF District Supt ANY

TITLE Asst. District Supt.

DATE 10-1-80

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

Well File

3a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
3. State Oil & Gas Lease No.
B-1030-1

## 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name N.M. 'T' St.NCT-1
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER H FEET FROM THE LINE AND 865 FEET FROM THE LINE, SECTION 1965 TOWNSHIP North 17-S RANGE 34-E NMPM.	10. Field and Pool, or Wdcat Vacuum Glorieta
5. Elevation (Show whether DF, RT, CR, etc.) 3992' (GR)	11. County Lea

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER _____	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> Repair Water Flow <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

- Rigged up. Pull rods & pump. Install BOP. Pull tubing.
- Set RBP @ 4032'. Spot 20' Sand on plug.
- Perforate 2 7/8" Csg W/2-JS @ 1648'.
- Cement 2 7/8" Csg perfs. @ 1648' W/500 Sx. Class 'H' Cement containing 2% CaCl. Squeeze W/Add'l. 150 Sx. Class 'H' Cement containing 2% CaCl. WOC. DOC. Test cement. Did not hold.
- Pump 250 Gals. 15% Acid down 2 7/8" Csg. Cement Csg perfs @ 1648' W/75 Sx. Class 'H' Cement containing 2% CaCl. WOC. DOC. Tested Csg to 600#. Tested OK.
- Install pumping equipment. Test & return to production.

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

SIGNED Jerry Beaton

TITLE Asst. Dist. Mgr.

DATE 7-30-81

Other Signed by

Jerry Beaton

~~DR. J. BEATON~~

CONDITIONS OF APPROVAL, IF ANY:

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
3. State Oil & Gas Lease No. <b>B-9596</b>

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

Name of Operator

**TEXACO Inc.**

Address of Operator

P.O. Box 728 - Hobbs, New Mexico 88240

Location of Well

UNIT LETTER N FEET FROM THE West LINE AND 660 FEET FROM  
PRE South LINE, SECTION 24 TOWNSHIP 11-S RANGE 32-F NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

4336' (DF)

7. Unit Agreement Name

8. Farm or Lease Name

New Mexico 'BR' State

9. Well No.

1

10. Field and Pool, or Wildcat

Moore Devonian

11. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

ALTERING CASING

TEMPORARILY ABANDON

CHANGE PLANS

PLUG AND ABANDONMENT

PULL OR ALTER CASING

REMEDIAL WORK

COMMENCE DRILLING OPS.

ALTERING CASING

CASING TEST AND CEMENT JOB

OTHER Repair Casing Leak

17. 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. Rigged up. Pull tubing and pump. Install BOP.
2. Set RBP @ 9000'. Set cement retainer @ 5305'.
3. Squeeze casing leak @ 5550' w/550 sx Class 'C' cement containing 5# salt/sx. Temp survey revealed top of cement @ 4993'. WOC.DOC.
4. Tested 5-1/2" csg to 1000#. Tested O.K.
5. Pulled RBP. Ran production equipment. Test & return to production.

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

*J.L. Coop*

TITLE Asst. Dist. Supt.

DATE 6-4-79

Brig. Signed by

Jerry Sexton

Dist. 1, Supr.

JUN 6 1979

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OIL CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

WELL FILE

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No.
E-7585

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.)

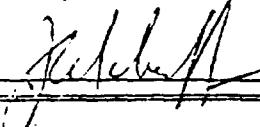
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name N.M. 'CG' State NCT-2
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER F LINE 1750 FEET FROM THE West LINE AND 2310 FEET FROM THE North LINE, SECTION 29 TOWNSHIP 17-S RANGE 35-E NEPM.	10. Field and Pool, or Wildcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 3978' (DF)	12. County Lea

16. 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"/>
TEMPORARILY ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>
OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/> Repair Water Flow <input checked="" type="checkbox"/>	

17. 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.

- Rigged up. Pull rods, pump & Tubing.
- Set RBP @ 4460'.
- Perforate 2 7/8" Csg w/2-JS @ 1690'.
- Cement 11 3/4" x 2 7/8" Csg Annulus w/975 Sx. Class 'H' Cement containing 2% CaCl. Cement did not circulate. Top of cement @ 100'. WOC. DOC. Test. Tested OK.
- Install production equipment. Test & return to production 7-13-81.

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

SIGNED   
*[Signature]*

TITLE Asst. Dist. Supt.

DATE 7-16-81

APPROVED BY *[Signature]* TITLE \_\_\_\_\_

DATE *[Signature]*

CONDITIONS OF APPROVAL, IF ANY: *[Signature]*

Jerry Deacon

MEXICO  
DEPARTMENT

WELL FILED  
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P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

Form C-103  
Revised 10-1-78

SUNDY NOTICES AND REPORTS ON WELLS  
FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
(APPLICATION FOR PERMIT -- (FORM C-101) FOR SUCH PROPOSALS.)

OTHER:

Hobbs, New Mexico 88240

1850 FEET FROM THE North LINE AND 550 FEET FROM  
LINE, SECTION 11 TOWNSHIP 18-S RANGE 34-E NEPM.

13. Elevation (Show whether DF, RT, GR, etc.)  
3996' (GR)

5a. Indicate Type of Lease <input checked="" type="checkbox"/> State <input type="checkbox"/> Fee
5b. State Oil & Gas Lease No. B-1258-1
7. Unit Agreement Name ---
8. Firm or Lease Name New Mexico "AE" State
9. Well No. 24
10. Field and Pool, or Wildcat Vacuum Abo Reef
11. County Lea

Fee of Lease <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
Gas Lease No. 1
ent Name
ise Name CO 'AB' State
Pool, or Wildcat abo Reef
F:
TERING CASING <input type="checkbox"/> <input checked="" type="checkbox"/>
IG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
CE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>	Repair water flow <input checked="" type="checkbox"/>

of starting any proposed

Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed  
operations.)

4. Pull Reda Pump.  
4800'. Spot 20' sand on plug.  
5½" Csg w/2-JS @ 1835'.  
Install retainer @ 1735'. Cemented csg perfs @ 1835' w/400 sx class H  
containing 2% CaCl. Cement circulated. WOC.DOC.  
5" csg to 600# for 30 minutes 3:00-3:30 PM, 11-16-81. Tested OK.  
Install submersible pump.  
Return to production. 12-14-81.

CaCl.

p. 6-22-81.

Information above is true and complete to the best of my knowledge and belief.

TITLE Asst. Dist. Mgr.

DATE 12-21-81

12-25-81

UN 29 1981

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

IL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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WELL FILE

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-1258-1

SUNDY 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 - I" (FORM C-101) FOR SUCH PROPOSALS.)

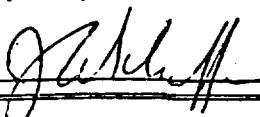
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	Unit Agreement Name Vacuum Grayburg San Andres Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER A 330 FEET FROM THE East LINE AND 330 FEET FROM THE North LINE, SECTION 11 TOWNSHIP 18-S RANGE 34-E NEPM.	10. Field and Pool, or WHdcat Vacuum Grayburg San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4007' (DF)	12. County Lea

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER Repair Water Flow <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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. Rigged up. Pull production equipment.
2. Set RBP @ 3000' & dump 10' Sx. Sand on plug. Perforate 4  $\frac{1}{2}$ " Csg w/2-JS @ 1635'.
3. Set cement retainer @ 1563'. Cemented w/650 Sx. Class 'H' cement. Cement circulated. Squeeze w/250 Sx. Class 'H' Cement. WOC. DOC. Test. Tested OK.
4. Install production equipment. Test & return to production.

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

SIGNED   
TITLE Asst. Dist. Mgr. DATE 6-3-81

Orly Signed By  
Jerry Seaton

TITLE

TITLE

APPROVED BY

Unit 1. Super.

TITLE

DATE

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WELL FILE

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No. B-4287

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: Water Injection	7. Unit Agreement Name West Lovington Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name West Lovington Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 51
4. Location of Well UNIT LETTER F, 1980 FEET FROM THE North LINE AND 1896 FEET FROM THE West LINE, SECTION 7 TOWNSHIP 17-S RANGE 36-E N.M.P.M.	10. Field and Pool, or Wildcat Lovington San Andres West
15. Elevation (Show whether DF, RT, CR, etc.) 3915' (DF)	12. County Lea

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	Repair Waterflow <input type="checkbox"/>
OTHER _____			

17. 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. Rigged up. Install BOP. Pull tubing & pkr.
2. Set RBP @ 4515' & spot 2 Sx. Sand on plug.
3. Perforate 5½" Csg W/2-JSPF @ 2020'.
4. Set Cement retainer @ 1932'. Cemented perfs. @ 2020' W/353 Sx. class 'H' Cement containing 2% CaCl. Cement Circulated. WOC. DOC.
5. Tested to 1000# for 30 minutes, 10:00-10:30 AM, 1-21-83. Tested OK.
6. Ran 2 3/8" plastic coated tubing W/pkr & set @ 4631'. Load Annulus W/inhibited water.
7. Return to Water Injection.

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

SIGNED Jerry Sexton

TITLE Asst. Dist. Mgr.

DATE 2-2-83

APPROVED BY

TITLE

DATE

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT 1 SUPERVISOR

TITLE

FEB 7 1983

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WELL FILE

L CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

So. Indicate Type of Lease

State

Fee

S. State Oil & Gas Lease No.

B-1306

SUNDY 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 - I" (FORM C-101) FOR SUCH PROPOSALS.)

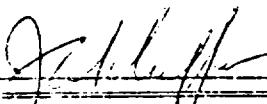
1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER	7. Unit Agreement Name Vacuum Grayburg San Andres Unit
2. Name of Operator Texaco, Inc.			8. Field or Lease Name Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, NM 88240			9. Well No. 53
4. Location of well UNIT LETTER B LINE 660 FEET FROM THE North LINE AND 1980 FEET FROM			10. Field and Pool or Wildcat Vacuum Grayburg San Andres Unit
THE East LINE, SECTION 2 TOWNSHIP 18-S RANGE 34-E NWPM.			
15. Elevation (Show whether DF, RT, GR, etc.) 4011' (GR)			12. County Lea

16. 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"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REMEDIAL WORK	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	COMMENCE DRILLING OPS.	<input type="checkbox"/>
		CASING TEST AND CEMENT JOB	<input type="checkbox"/>
		OTHER	<input checked="" type="checkbox"/> Repair Water Flow

17. 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.

- Rigged up. Pull rods & pump.
- Set RBP @ 3830' & spot 10' sand on plug.
- Perforate 5 1/2" Csg w/2-JS @ 1621'. Set cement retainer @ 1534'.
- Cemented 8 5/8" x 5 1/2" Csg Annulus w/590 sx. class 'H' Cement containing 2% CaCl. Ran Temperature Survey. WOC. DOC. Tested Csg. Tested OK.
- Install production equipment. Test & return to production.

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



TITLE Asst. Dist. Supt.

DATE 12/11/80

Orig. Signed by

Jerry Sosa

Print Name

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE DEC 15 1980

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Form C-103  
Revised 10-1-73

WELL FILE

5a. Indicate Type of Lease

State

Fed

5b. State Oil & Gas Lease No.

B-155

SUNDY 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.)

OIL WELL  GAS WELL  OTHER

1. Name of Operator

Texaco Inc.

2. Address of Operator

P.O. Box 728, Hobbs, NM 88240

3. Location of Well

UNIT LETTER I 1800 FEET FROM THE South LINE AND 560 FEET FROM  
THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)

3886 (GR)

12. County

Lea

10. Field and Pool or Kilocat  
Vacuum Giorietta  
Vacuum Blinbry

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB

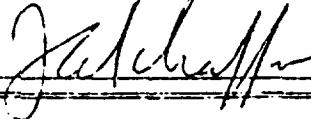
OTHER

OTHER Cement Water Flow

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Clean out. Set RBP @ 5000'.
3. Cement squeezed 11-3/4" - 8-5/8" csg annulus w/650 sx Class "C" cement. Circulate to surface thru csg leaks @ 1495' & 208'. WOC. Tested csg. Tested OK.
4. Install pumping equipment. Test & return to production.

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



TITLE Asst. Dist. Supt.

DATE 7-11-80

Orig. Signed

Jerry Sexton

APPROVED BY  TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL  TITLE \_\_\_\_\_

DATE JUL 14 1980

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No.
B-1961

SUNDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER -	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name N.M. 'J' State
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 3
4. Location of Well UNIT LETTER F 1983 FEET FROM THE North LINE AND 1981 FEET FROM THE West LINE, SECTION 24 TOWNSHIP 19-S RANGE 36-E NEPM.	10. Field and Pool or Wildcat Eumont Yates Seven Rivers Queen Gas
11. Elevation (Show whether DF, RT, CR, etc.) 3723' (DF)	12. County Lea

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER _____	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <u>Eliminate Pressure on Casing strings at the surface</u> <input checked="" type="checkbox"/>	ALTERING-CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

1. Rigged up. Install BOP.
2. Set RBP @ 3500'. Pressure test casing. Log Well.
3. Reset RBP @ 2690'. Perf. 5 1/2" Csg w/2-JS @ 1450'. Spot 2 sx. Sand on RBP. Set cement retainer @ 1378'.
4. Squeeze perf. @ 1450' w/500 sx Class "H" cement. Cement circulated. WOC.
5. DOC & retainer. Test casing w/1000# for 30 minutes. Tested OK. Pull RBP.
6. Install production equipment. Return to production.

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

SIGNED *Jerry Sexton* TITLE Asst. Dist. Supt.

DATE 3-26-79

Orig. Signed by

Jerry Sexton

Date 1, Supv.

TITLE

DATE

MAR 30 1979

STATE OF NEW MEXICO  
MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

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OPERATOR	

*Initials*  
*FILE*

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Foreign <input type="checkbox"/>
5b. State Oil & Gas Lease No. B-1961

SUNDY NOTICES AND REPORTS ON WELLS.

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPLY OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>N.M. "J" State</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>2</b>
4. Location of Well UNIT LETTER <b>N</b> 1980 FEET FROM THE <b>West</b> LINE AND <b>660</b> FEET FROM THE <b>South</b> LINE, SECTION <b>24</b> TOWNSHIP <b>19-S</b> RANGE <b>36-E</b> N.M.P.M.	10. Field and Pool or Wildcat <b>Eunice-Monument</b> <b>Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3715' (DF)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <b>Eliminate pressure on casings @ the surface</b> <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>			

17. 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. Rig up. Install BOP.
2. Set CIBP @ 3780'. Pressure test 7" csg to 1000#. Tested OK.
3. Ran cement bond log. Set 7" RBP @ 2700' & spot 2 sx sand on plug.
4. Perforate 7" csg w/2-JS @ 1570'. Set cement retainer @ 1555'. Cement 7" - 9 5/8" csg annulus w/600 sx Class 'H' Neat cement. Cement circulated. Job complete 2:00 PM, 2-13-79. WOC. DOC & retainer.
5. Test 7" csg to 1000# for 30 minutes, 2:00 - 2:30 PM, 2-17-79. Tested OK. Pull RBP.
6. Install equipment. Complete as Shut-In Natural Gas, 2-14-79.

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

*Initials*

TITLE **Asst. Dist. Supt.**

DATE **3-1-79**

*Donny S. Sauer*

*Jerry L.*

TITLE

DATE

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AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-101  
Revised 10-1-78

3a. Indicate Type of Lease

State

Fee

3b. State Oil & Gas Lease No.

B-154

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO ABANDON OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)

3. OIL  GAS WELL  OTHER -

2. Name of Operator

TEXACO Inc.

3. Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM  
THE West LINE, SECTION 1 TOWNSHIP 20-S RANGE 36-E NWPM.

15. Elevation (Show whether DF, RT, CR, etc.)

3578' (DF)

12. County

Lea

7. Unit Agreement Name

N.M. "E" St. NCT-1

9. Well No.

4

10. Field and Pool, or Wildcat  
Eunice Monument  
Grayburg San Andres

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER Eliminate Pressure on Casing strings @ surface

ALTERING CASING   
PLUG AND ABANDONMENT

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3590'. Load 5" csg w/treated water. Pressure tested 5 1/2" csg w/1000# for 30 minutes. Tested OK.
3. Squeezed 7"-9 5/8" csg annulus w/300 sx Class H cement.
4. Pulled RBP/ Install pumping equipment. Test & return to production.

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

TITLE Asst. Dist. Supt.

DATE 3-26-79

Orig. Signed by

Jerry Sexton

Dist. 1, Supv.

TITLE

DATE MAR 30 1979

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ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-10,  
Revised 10-1-76

SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
S. State Oil & Gas Lease No.
B-154

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO CEEPEE OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - II" (FORM C-1011 FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER:	7. Unit Agreement Name
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>N.M. E St. NCT-1</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>2</b>
4. Location of Well UNIT LETTER <b>N</b> FEET FROM THE <b>South</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>1</b> TOWNSHIP <b>20-S</b> RANGE <b>36-E</b> NMPLM.	10. Field and Pool, or Wildcat <b>Eumont Yates Seven Rivers Gas</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3570' (DF)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER _____	<b>Eliminate pressure on casing stings @ surface.</b> <input checked="" type="checkbox"/>		

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Install BOP. Pull tubing.
2. Set RBP @ 2995'. Pressure Test 5 1/2" OD csg. w/1000# for 30 minutes, 6:15 - 6:45 PM, 3-8-79. Tested OK.
3. Squeezed 7 5/8" - 10 3/4" Csg Annulus w/250 Sx Class "H" Cement. Pull RBP.
4. Ran production tubing. Load Annulus w/treated water.
5. Return well to production.

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

SIGNED *J. Schaffner*

TITLE **Asst. Dist. Supt.**

DATE **3-20-79**

Orig. Signed by

**Jerry Sexton**

TITLE **Dist. 1, Supv.**

DATE **Mar 21 1979**

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WELL SITE

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

B-1733-1

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name --
2. Name of Operator Texaco Inc.	8. Farm or Lease Name New Mexico 'L' State
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 7
4. Location of well UNIT LETTER <u>A</u> FEET FROM THE <u>North</u> LINE AND <u>560</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> N.M.P.M.	10. Field and Pool, or Wildcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) <u>3991'</u> (DF)	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS   
OTHER \_\_\_\_\_

REMEDIAL WORK   
COMMENCE DRILLING OPNS.   
CASING TEST AND CEMENT JOB   
OTHER Repair Waterflow

ALTERING CASING   
PLUG AND ABANDONMENT

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE PAGE 1103.

- Rigged up. Pull production equipment.
- Set RBP @ 5900' & spot sand on plug. Could not pump down 11 3/4" - 8 5/8" Csg. Annulus.
- Perforate 2 7/8" & 8 5/8" Csg. w/2-JS @ 1535'. Circulate fresh water down 2 7/8" & up 11 3/4" & 8 5/8" Csg. Annulus.
- Cement 11 3/4" x 3 5/8" Csg. Annulus w/550 sx. class 'H' cement containing 2% CaCl. Cement circulated. Squeezed 150 sx. class 'H' cement below perfs. @ 1535'.
- WOC & Test. Tested OK. DOC.
- Test 2 7/8". Tested OK.
- Install production equipment. Test & return to production.

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

SIGNED Orlando J. Soto

TITLE Asst. Dist. Supt.

DATE 1/22/81

APPROVED BY Jerry Johnson

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL None

DIST. 1/22/81

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

TYPE OF LEASE REQUESTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	✓
LAND OFFICE	✓
OPERATOR	✓

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
SB. State Oil & Gas Lease No.
B-9385

SUNDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DRAFF OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER -

Name of Operator

TEXACO Inc.

Address of Operator

P.O. Box 728, Hobbs, NM 88240

Location of Well

UNIT LETTER H, 1980 FEET FROM THE North LINE AND 660 FEET FROM

THE East LINE, SECTION 22 TOWNSHIP 14-S RANGE 33-E N.M.P.M.

15. Elevation (Show whether DF, RT, CR, etc.)

4210' (DF)

7. Unit Agreement Name

-

8. Firm or Lease Name

New Mexico "AN" State

9. Well No.

8

10. Field and Pool, or Wildcat

Saunders Permo Penn

11. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
RE-DRILL OR ALTER CASING   
OTHER

PLUG AND ABANDON   
CHANGE PLANS

REMEDIAL WORK   
COMMENCE DRILLING OPS   
CASING TEST AND CEMENT JOB   
OTHER Repair casing leak

ALTERING CASING   
PLUG AND ABANDONMENT

7. 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. Rigged up.
2. Set RBP @ 9366'. Test csg w/pkr. Leak between 4912'-5380'.
3. Set cement retainer @ 4882'. Squeeze leak w/100 sx Class "C" Cement containing .6% D-19 followed by 100 sx Class "C" Neat Cement. WOC. DOC. Test liner. Tested OK.
4. Install pumping equipment. Test & place on production.

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

TITLE Asst. Dist. Supt. DATE 7-25-80

One Signed:

John F. Bunnell

TITLE

DATE JUL 25 1980

APPROVED BY

CONDITIONS OF APPROVAL, IF Geologist

## ENERGY AND MINERALS DEPARTMENT

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WELL CONSERVATION DIVISION  
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SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-1306	

## SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OCCEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)OIL WELL  GAS WELL  OTHER -

Name of Operator

Texaco, Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER B . 330 FEET FROM THE North LINE AND 2135 FEET FROMTHE East LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3964' (GR)

7. Unit Agreement Name

8. Farm or Lease Name

N. M. 'R' St. NCT-1

9. Well No.

10

10. Field and Pool, or Wildcat

Vacuum Glorieta

12. County

Lea

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB 

OTHER \_\_\_\_\_

OTHER Repair Water Flow & Treat 

7. 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. Rigged Up. Pull rods & pump. Install BOP. Pull tbg.
2. Set RBP @ 4016'. Cement 10 3/4" x 2 7/8" Csg Annulus w/775 sx. Class 'c' Thix-set cement containing 2% CaCl. NOC. Temperature show indicates cement from 1750'-surface. NOC. Pull RBP.
3. Acidize perfs. 5984'-6125' w/6000 gal. 20% NEFE Acid in 6 stages using a total of 1500# rock salt & 750# Benzoic Acid Flakes between stages.
4. Install production equipment. Test & return to production.

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

TITLE Asst. Dist. Supt.

DATE 12/12/80

Duly Signed by

Sandy Seasey

TITLE

DATE

APPROVED BY Dale AnayaCONDITIONS OF APPROVAL Due Anaya

DEC 15 1980

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WELL  
NOTICE

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

3a. Indicate Type of Lease

State

Fee

3. State Oil & Gas Lease No.

B-1306

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	7. Unit Agreement Name
---	-----------------------------------	--------------------------------	------------------------

2. Name of Operator	TEXACO Inc.	8. Farmer Lease Name
---------------------	-------------	----------------------

3. Address of Operator	P. O. Box 728, Hobbs, New Mexico 88240	9. Well No.
------------------------	--	-------------

4. Location of Well	G 2310 FEET FROM THE North LINE AND 1650 FEET FROM	10. Field and Pool, or Wildcat Vacuum Abo Reef
UNIT LETTER	THE East LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E N.M.P.M.	

15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea
3973' (GR)	

16. 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 OPS. <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 <input type="checkbox"/>		OTHER <u>Repair Water Flow</u>	

17. 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. Rigged up. Pull rods, pump & tbg.
2. Set RBP @ 4000' & dump 20' Sand on plug.
3. Perforate 2 7/8" Csg w/2-JS @ 3050'.
4. Acidize perfs @ 3050' w/250 gals. 15% MS Acid. Squeeze w/50 Sx. Class 'H' Cement containing 3.5# Salt/sack. WOC. Tested OK.
5. Install production equipment. Test & return to production.

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

SIGNED J. Johnson

TITLE Asst. Dist. Mgr.

DATE 6-11-81

APPROVED BY Jerry Johnson

TITLE

DATE JUN 13 1981

CONDITIONS OF APPROVAL, IF ANY:

'Dale L. Supv.'

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ENERGY AND MINERALS DEPARTMENT

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Form C-103  
Revised 10-1-7

5a. Indicate Type of Lease  
State  For   
5b. State Oil & Gas Lease No.  
B-155

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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: _____	7. Unit Agreement Name --
2. Name of Operator <b>Texaco, Inc.</b>	8. Farm or Lease Name <b>N. M. 'O' St. NCT-1</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, NM 88240</b>	9. Well No. <b>24</b>
4. Location of Well UNIT LETTER <b>P</b> , FEET FROM THE <b>South</b> LINE AND <b>660</b> FEET FROM THE <b>East</b> LINE, SECTION <b>36</b> , TOWNSHIP <b>17-S</b> , RANGE <b>34-E</b> , NWPM.	10. Field and Pool, or Wildcat <b>Vacuum Glorieta; Vacuum Abo, North &amp; Vacuum</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3994' (DF)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	Repair Water flow <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>			X

17. 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. Rigged up. Pull rods & pump. Pull tubing in Glorieta string.
2. Sett RBP in Abo string @ 4000'
3. Cemented 13 3/8" & 9 5/8" csg Annulus w/825 sx class 'H' Cement. Follow w/900 sx, class 'H' cement containing 2% CaCl.
4. WOC & test. Tested OK.
5. Install pumping equipment. Test & place on production.

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

*G. L. H. /*

SIGNED  TITLE **'Asst. Dist. Supt.'**

DATE **1/9/81**

JAN 12 1981

APPROVED BY  TITLE

TITLE

DATE

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ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Foreign <input type="checkbox"/>
SB. State Oil & Gas Lease No. <b>B-1113-1</b>

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name <b>Central Vacuum Uni</b>
2. Name of Operator <b>TEXACO Inc.</b>	8. Form of Lease Name <b>Central Vacuum Uni</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>119</b>
4. Location of Well UNIT LETTER <b>M</b> FEET FROM THE <b>South</b> LINE AND <b>660</b> FEET FROM	10. Field and Pool, or Wildcat <b>Vacuum Grayburg</b> <b>San Andres</b>
THE <b>West</b> LINE, SECTION <b>6</b> TOWNSHIP <b>18-S</b> RANGE <b>35-E</b> N.M.P.M.	
11. Elevation (Show whether DF, RT, GR, etc.) <b>3981' (GR)</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS   
REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER Repair Casing

ALTERING CASING   
PLUG AND ABANDONMENT

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Pull tubing.
2.  $5\frac{1}{2}$ " Casing parted @ 2260' & collapsed @ 2540' - 2550'.
3. Unable to repair casing.
4. Well Shut-In pending approval to plug & abandon.

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

SIGNED

Orig. Signed by  
Jerry Sexton

TITLE Asst. Dist. Supt.

DATE 4-15-80

APPROVED BY Asst. Dist. Supt.

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF EASURES REQUESTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

WELL FILE

3a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
3. State Oil & Gas Lease No.
B-155

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO STEP OUT OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - 1" (PCOW C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator Texaco Inc.	8. Farm or Lease Name N. M. '0' State NCT-1
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 13
4. Location of Well UNIT LETTER N, 519 FEET FROM THE South LINE AND 1839 FEET FROM	10. Field and Pool, or Wildcat Vacuum Glorieta
THE West LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NEPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 3997' (GR)	12. County Lea

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>  REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <u>Repair waterflow</u> <input checked="" type="checkbox"/>
	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state oil pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- Rigged up. Pull Gas Lift valves. Set RBP @ 5000'.
- Test Csg. strings. Test OK.
- Perforated 2 7/8" & 8 5/8" Csg. w/4-JS @ 1575'.
- Cement perfs @ 1575' w/450 sx. class 'H' cement containing 2% CaCl. Cement circulated. Squeeze w/addl. 250 sx. class 'H' cement. WOC. Tested OK.
- Install pumping equipment. Test & place on production.

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

SIGNED J. W. Haff

TITLE Asst. Dist. Supt.

DATE 4/1/81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil well <input checked="" type="checkbox"/>	gas well <input type="checkbox"/>	other
2. NAME OF OPERATOR TEXACO Inc.		
3. ADDRESS OF OPERATOR P.O. Box 728, Hobbs, NM 88240		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 660' FSL & 660' FEL AT TOP PROD. INTERVAL: Unit Letter 'P' AT TOTAL DEPTH:		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Test for csg leak	<input type="checkbox"/>	X
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.)*		
1. Rigged up 3-15-79. Kill well. Install BOP. Pull tubing. 2. Set RBP @ 4908'. Test 7" csg liner w/RTTS packer. Tested OK. Ran 9-5/8" RTTS tool & tested. Found wellhead leak. Repaired same. 3. Remove BOP & ran tubing. Swab well. -Install pumping equipment. 4. On 24 Hr. potential test ending 6-27-79, well pumped 3 BO, 3 BW, GOR 14,000. 5. Return to production.		
18. I hereby certify that the foregoing is true and correct		
SIGNED <i>[Signature]</i>	TITLE Asst. Dist. Supt.	DATE 7-2-79
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

5. LEASE LC-057509	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
7. UNIT AGREEMENT NAME -	
8. FARM OR LEASE NAME G.L. Erwin "B" Fed. ENCT-2	
9. WELL NO. 1	
10. FIELD OR WILDCAT NAME Justis Blinney	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 35, T-24-S, R-37-E	
12. COUNTY OR PARISH	13. STATE Lea New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DF, KDB, AND WD) 3171' (DF)	

**RECEIVED**

JUL 3 1979

U. S. GEOLOGICAL SURVEY

HOBBS, NEW MEXICO

NOTE: Report results of multiple completion or zone change on Form 9-330.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

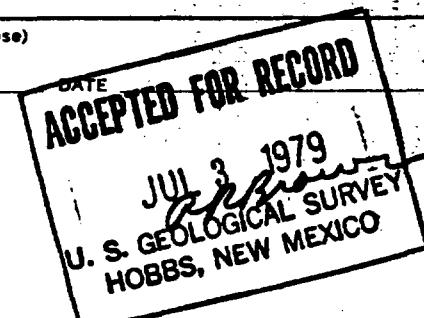
SIGNED *[Signature]* TITLE Asst. Dist. Supt. DATE 7-2-79

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

WELL FILE  
**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 Form 9-331-C for such proposals.)

1. oil well <input checked="" type="checkbox"/>	gas well <input type="checkbox"/>	other
2. NAME OF OPERATOR TEXACO Inc.		
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1650' FNL & 1650' FEL AT TOP PROD. INTERVAL: (Unit Letter G) AT TOTAL DEPTH:		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other)		

5. LEASE LC-030174 (S)	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME -	
7. UNIT AGREEMENT NAME -	
8. FARM OR LEASE NAME W. H. Rhodes 'B' NCT-1	
9. WELL NO. 1	
10. FIELD OR WILDCAT NAME Rhodes Yates	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-26-S, R-37-E	
12. COUNTY OR PARISH Lea	13. STATE New Mexico
14. API NO.	
15. ELEVATIONS (SHOW DFT, KDB, AND WD) 2991' (GR)	

RECEIVED

AUG 27 1979 (NOTE: Report results of multiple completion or zone change on Form 9-330.)

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

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.)\*

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3027'. Test casing for leaks. Log well. Dump 3 sx Sand on RBP.
3. Perforate 7" csg w/2-JS @ 2580'.
4. Set cement retainer @ 2465'. Squeeze 7" csg. perfs. w/500 sx Class 'H' cement & 100 sx Class 'C' Cement. Log well.
5. Perforate 7" csg w/2-JS @ 1580'. Set cement retainer @ 1500'. Squeeze w/500 sx Class 'H' Cement followed w/100 sx Class 'C' Cement. Circulated Cement.
6. DOC & retainer. Tested 7" csg. w/1000# for 30 minutes, 9:30 - 10:00 AM, 7-16-79. Tested OK.
7. Install pumping equipment.
8. On 24 Hr. Potential Test ending 8-16-79, well pumped 60 Bbls. Oil, 437 Bbls. Water, GOR 300. Return to production. Subsurface Safety Valve: Manu. and Type Set @ Ft.

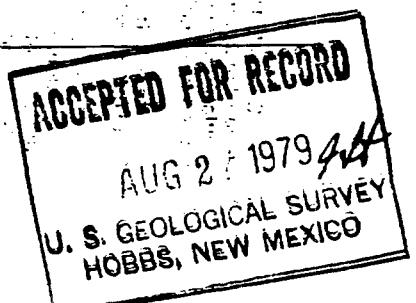
18. I hereby certify that the foregoing is true and correct

SIGNED DeLalloff TITLE Asst. Dist. Supt DATE 8-23-79

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2008  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

SA. Indicate Type of Lease
State <input type="checkbox"/>
Fed <input checked="" type="checkbox"/>
SA. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO FISH ON PLUG BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT - 10 (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

1. Name of Operator

TEXACO Inc.

1. Address of Operator

P. O. Box 728 - Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER G . 1980 FEET FROM THE North LINE AND 2307 FEET FROM

THE East LINE, SECTION 12 TOWNSHIP 20S RANGE 37E N.M.P.M.

15. Elevation (Show whether DF, RT, CR, etc.)

3571' (DF)

7. Unit Agreement Name

8. Farm or Lease Name

C. H. Weir 'A'

9. Well No.

11

10. Field and Pool, or Wildcat

Skaggs Drinkard

12. County

Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK

PLUG & ABANDON

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CHANGE PLANS

CASING TEST AND CEMENT JOBS

OTHER \_\_\_\_\_

OTHER Repair csg leak & treat Drk.  
Workover unsuccessful - Well P&A

SUBSEQUENT REPORT OF:

17. 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. Rigged up. Install BOP. Pulled & fished 3118' 2-7/8" Tubb casing & 1854' 2-7/8" Drinkard casing. Both strings of 2-7/8" casing parted @ 3118'.
2. Unable to fish remainder of 2-7/8" Drinkard casing & repair well. Top of fish @ 2109'.
3. Ran 2-3/8" tubing & clean out to 3167'. Sonar Log indicated apparent water flow below 3162' (65 BWPD).
4. Washed to 3193' & spotted 300 sx. Class 'C' cement plug containing 2% CaCl. Tagged top of cement @ 2785'. Water flow 65 BWPD.
5. Spot 300 sx. Class 'C' cement plug w/2% CaCl @ 2785'. Tagged top of cement @ 2644'. Sonar Log indicated flow movement thru Drinkard fish to 2109'.
6. Spotted 1000 sx. Class 'C' cement containing 6# salt, 6# sand, & 1/4# flocele/sx. @ 2638'. Pulled tubing to 2452' & spotted 500 sx cement plug (Class 'C' containing same as above). Top of cement 2194'. Water flow 60 BWPD.
7. Spotted 1200 sx. Class 'C' cement plug containing 6# salt, 6# sand, & 1/4# flocele/sx. @ 2194'. Top of cement 1644'. Water flow shut off.
8. Spotted 150 sx. Class 'C' cement plug containing 2% CC @ 1486'. Top of cement 1178'.
9. Tested 8-5/8" csg to 350# for 30 minutes, 8:00-8:30 AM, 9-12-79. Tested O.K.
10. Spotted 90 sx. Class 'C' cement plug from 311' - Surface.
11. Install Dry Hole Marker. Well P&A, 9-10-79.

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

SIGNED

TITLE Asst. District Supt.

DATE 9-20-79

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY

TITLE OIL & GAS INSPECTOR

DATE

NEW MEXICO  
DEPARTMENT OF NATURAL RESOURCES

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

PROPOSAL	
DISTRIBUTION	
STATE	
U.S.	
HEAD OFFICE	
OPERATOR	

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.

OIL WELL  GAS WELL

OTHER:

1. Name of Operator

Texaco Inc.

2. Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

3. Location of Well

UNIT LETTER H FEET FROM THE North LINE AND 660 FEET FROM

THE East LINE, SECTION 31 TOWNSHIP 17-S RANGE 35-E NMPLM.

15. Elevation (Show whether DF, RT, GR, etc.)

3981' (GR)

3a. Indicate Type of Lease

State

Fan

3. State Oil & Gas Lease No.  
NM-1021

7. Unit Agreement Name  
Central Vacuum Unit

8. Farmout Lease Name  
Central Vacuum Unit

9. Well No.  
62

10. Field and Pool or Wildcat  
Vacuum Grayburg  
San Andres

12. County  
Lea

11. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

PLUG AND ABANDON

CHANGE PLANS

REMEDIAL WORK

COMMENCE DRILLING OPS.

CASING TEST AND CEMENT JOB

ALTERING CASING

PLUG AND ABANDONMENT

OTHER Repair Water Flow

17. 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. Rig up. Pull production equipment. Install BOP.
2. Set RSP @ 4000'.
3. Perforate 5 1/2" csg. w/2-JS @ 1560'.
4. Set cement retainer @ 1500'. Cement w/350 sx. class 'H' cement. Circulate cement. Squeeze w/addl 150 sx. class 'H' cement. VOC. DOC. Test.
5. Install production equipment. Test & return to production.

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

SIGNED

TITLE Assistant District Manager

DATE 7/16/81

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

Don X. Sosa

NEW MEXICO

LEA

**WELL FILE**

Central Vacuum 62 11-9-81 5½" @ 4270 RECOMMENDED REMEDIAL WORK: 4690

Unit To correct saltwater flow.  
(EXP) As required by the NMOCD.

TX WI 36.27108  
Est. #1-3636

MIRU Permian WS 11-9-81. Pltd rds & tbgs. Ran 5½" RBP on 2-7/8" tbgs. Set 5½" csg @ 3970'. Tstd BP to 500#.OK. Spotted 20' sd on BP. POH. Prep to perf.

No. of Days: Est: 6 Comm: 1 Cash: Est: \$26,000 Comm: \$2,500  
11-10/12-81

McCull pf'd 5½" csg w/2 JS @ 1560. Ran cmt ret. Set @ 1488'. Halli cmtd thru perfs @ 1560 w/1450 sx Cl H, 2% CaCl. Cmt did not cir. JC @ 12:30, 11-10-81. Jarrel ran temp survey. Top of cmt @ 150'. Ck'd brdnhd. No flow. Press-0#. WIH w/4-3/4" bit. Drld cmt ret & cmt 1488-1560'. Tstd 5½" csg to 600# fr 3-3:30 PM, 11-11-81. OK. POH. Prep to pull RBP.

No. of Days: Est: 6 Comm: 3 Cash: Est: \$26,000 Comm: \$13,500  
11-13/19-81

WIH w/ rtvg head. Cir sd off RBP. POH w/5½" RBP. WIH w/ prod equip..RDMO. Rtrn well to Prod. 11-12-81. P/24 hrs, 220 BNO, 46 BSW.

No. of Days: Est: 6 Comm: 3 Cash: Est: \$26,000 Comm: \$13,500  
11-20/30-81

On 24 hr PT ending 8 AM, 11-20-81. P/217 BO, 45 BSW. GOR 257. Grav 36.8. 10-144" SPM. 2½" pmp. Prod fr Vacuum Grayburg San Andres 4-3/4" OH 4270-4690'. Prod prior to W/O 136 BOPD. Allow 217 BOPD. FINAL REPORT.

No. of Days: Est: 6 Comm: 4 Cash: Est: \$26,000 Comm: \$22,630

Texas 36.2700

SUBSEQUENT OPERATION REPORT	
HOTTER DISTRICT	<u>Buckeye</u> AREA
WORKOVER COST	<u>\$8208</u> PAYOUT —
<i>Est. # 1-3636</i>	

G-12

STATE OF NEW MEXICO  
MINE AND MINERALS DEPARTMENT

DATE OF REPORT RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

MINE AND MINERALS DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease
State <input type="checkbox"/>
Fed <input checked="" type="checkbox"/>
5b. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.

OIL WELL  GAS WELL  OTHER: Water Injection

Name of Operator

TEXACO Inc.

Address of Operator

P.O. Box 728, Hobbs, NM 88240

Location of Well

UNIT LETTER 0 1977 FEET FROM THE East LINE AND 661 FEET FROM  
THE South LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E UTM

15. Elevation (Show whether DF, RT, GR, etc.)

3563' (DF)

16. Field and Pool, or Unit

Skaggs Grayburg

17. County

Lea

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 CAVING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
FULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	<input type="checkbox"/>
OTHER <input type="checkbox"/>	<input type="checkbox"/>	OTHER <input type="checkbox"/>	Repair Water Flow <input checked="" type="checkbox"/>

17. 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. Rigged up. Pull pkr. & tubing.
2. Set RBP @ 3670' & pkr. @ 3669'. Test csg. Pull pkr. & dump 2 sx. sand on plug.
3. Perforate 5-1/2" csg w/4 JS @ 1515'.
4. Set cement retainer @ 1429'. Cement perf @ 1515' w/400 sx. Class "C" cement containing 2% CaCl. WOC. DOC. Cement from surface - 1450'. Void from 1450' - 1538'. Good cement 1538' - 1630'.
5. Perforate 5-1/2" csg w/2 JS @ 1517'. Set retainer @ 1429'. Cement w/50 sx. Thick Set cement containing 9# salt per sack followed w/100 sx. Class "C" cement containing 9# salt per sack. WOC & DOC.
6. Install injection equipment. Test & return to injection.

THE COMMUNITON MUST BE NOTIFIED  
24 HOURS PRIOR TO COMMENCING WORK

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

*Jackie H.*

TITLE

Asst. Dist. Supt.

TITLE

DATE October 17, 1980

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

TITLE

DATE *Oct 17, 1980*

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

WELL  
F1

SA. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
S. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - I" (FORM C-101) FOR SUCH PROPOSALS.

OIL WELL  GAS WELL  OTHER -

Name of Operator

TEXACO INC.

Address of Operator

P.O. BOX 728 Hobbs, NM 88240

Location of Well

UNIT LETTER F, 1980 FEET FROM THE West LINE AND 1985 FEET FROM

THE North LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E MMPPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
3574' (DF)

7. Unit Agreement Name

8. Form of Lease Name  
C. H. Weir A

9. Well No.

10. Field and Pool, or Wildcat  
See below

12. County  
Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER _____	

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Repair Water Flow <input checked="" type="checkbox"/>

16. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

Field - Skaggs Glorieta, Weir Blinebry East, Monument Tubb

- I. RIGGED UP. PULL RODS AND PUMP FROM GLORIETA STRING. PULL 2 1/16" TUBING AND PACKER FROM MONUMENT STRING.
2. SET CIBP IN TUBB STRING @ 4000' AND SPOT 40' CEMENT ON TOP OF PLUG.
3. SET CIBP IN GLORIETA @ 3994' AND SPOT 40' CEMENT ON PLUG.
4. SET CIBP IN BLINEBRY @ 4020' AND SPOT 40' CEMENT ON PLUG.
5. PERFORATE 2 7/8" TUBB STRING W/ 2-JS @ 1489'.
6. CEMENT 2 7/8" CSG PERFS @ 1489' W/ 500 SX CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. SQUEEZE W/ ADDL 240 SX CLASS H CEMENT. WOC. DOC.
7. TESTED CASING TO 700# FOR 30 MINUTES, 2:00 - 2:30 PM, 10-17-83. TESTED OK.
8. INSTALL PUMPING EQUIPMENT IN GLORIETA STRING.
9. DOC & CIBP IN TUBB AND BLINEBRY STRINGS.
10. INSTALL PRODUCTION EQUIPMENT. TEST AND RETURN TO PRODUCTION.

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

TITLE Asst Dist Mgr

DATE 11-11-83

PROVED BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR  
CONDITIONS OF APPROVAL, IF ANY

NOV 16 1983  
DATE

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Form C-103  
Revised 10-1-73

WELL FILE

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.)

OIL WELL  GAS WELL  OTHER -

Name of Operator

TEXACO INC.

Address of Operator

P. O. BOX 728, HOBBS, NEW MEXICO 88240

Location of Well

UNIT LETTER M FEET FROM THE SOUTH LINE AND 825 FEET FROM

TOWNSHIP WEST LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E MMPC.

15. Elevation (Show whether DF, RT, GR, etc.)

3569' (DF)

3a. Indicate Type of Lease

State  Fee

3. State Oil & Gas Lease No.

7. Unit Agreement Name

8. Farm or Lease Name

M. B. WEIR "B"

9. Well No.

7

10. Field and Pool, or Wildcat

SKAGGS DRINKARD

12. County

LEA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CHANGE PLANS

CASING TEST AND CEMENT JOB

OTHER

OTHER Repair Water Flow

17. 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.

SEE ATTACHED

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

ICHEN Jerry Sexton

TITLE ASST DIST MGR

DATE 7-21-83

ORIGINAL SIGNED BY JERRY SEXTON  
APPROVED BY DISTRICT 1 SUPERVISOR

TITLE

DATE SEP 26 1983

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## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised, 10-1-

WELL FILE

## 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name —
2. Name of Operator TEXACO INC.	8. Farm or Lease Name C. H. Weir A
3. Address of Operator P. O. BOX 728, HOBBS, NEW MEXICO 88240	9. Well No. 10
4. Location of Well UNIT LETTER J FEET FROM THE EAST LINE AND 1980 FEET FROM	10. Field and Pool, or Wildcat WEIR BLINEBRY EAST SKAGGS DRINKARD
TMC SOUTH LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E MMFM.	
11. Elevation (Show whether DF, RT, GR, etc.) 3577' (DF)	12. County

## 16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	REPAIR WATERFLOW <input type="checkbox"/>
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	

## 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1003.

- RIGGED UP. PULL RODS AND PUMP. INSTALL BOP. PULL TUBING.
- SET CIBP IN DRINKARD STRING @ 5250' AND SPOT 40' CEMENT ON PLUG.
- SET CIBP IN BLINEBRY STRING @ 5250' AND SPOT 40' CEMENT ON PLUG.
- PERF. BLINEBRY STRING W/2-JSPF @ 1469'.
- CEMENTED PERFS. @ 1469' W/400 SX CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. SQUEEZE PERFS W/1400 SX CLASS H CEMENT CONTAINING 2% CACL. WOC. DOC.
- DID NOT HOLD.
- CEMENT PERS @ 1469' W/400 SX CLASS H CEMENT CONTAINING 3% CACL & 4000 GALS FLOCHEX IN 4-EQUAL STAGES AND FOLLOWED W/100 SX. CLASS H CEMENT CONTAINING 3% CACL. WOC. DOC.

CONTINUED ON PAGE 2

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

SIGNED

ORIGINAL SIGNED BY EDDIE SEAY

OIL &amp; GAS INSPECTOR

APPROVED BY

TITLE \_\_\_\_\_ ASST DIST MGR

DATE

11-20-83

TITLE \_\_\_\_\_

DATE

NOV 30 1983

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Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-4119

SUNDY 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.)

OIL WELL  GAS WELL

OTHER -

Water Injection

Name of Operator

TEXACO INC.

Address of Operator

P.O. Box 728, Hobbs, NM 88240

Location of Well

UNIT LETTER L, 660 FEET FROM THE West LINE AND 1980 FEET FROM

THE North LINE, SECTION 3 TOWNSHIP 17-S RANGE 36-E NEPM.

15. Elevation (Show whether IP, RT, GR, etc.)  
3880' (GR)

16. County  
Lea

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"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
FULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
	<input type="checkbox"/>

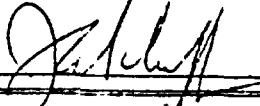
REMEDIAL WORK	<input type="checkbox"/>
COMMENCE DRILLING OPS.	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>
OTHER <u>Repair water flow</u>	<input checked="" type="checkbox"/>

ALTERING CASING	<input type="checkbox"/>
PLUG-AND-ABANDONMENT	<input type="checkbox"/>
	<input type="checkbox"/>

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Installed BOP. Pulled tubing & packer.
2. Set RBP & set @ 4516'. Spot 2 sx sd on RBP.
3. Perforated 5-1/2" csg w/2 JSPI @ 2030'.
4. Set cement retainer @ 1943'. Cemented w/350 sx C1 H cement. Squeezed w/250 sx C1 H, followed by 50 sx Thixset w/3% CaCl. Job Complete 10:30 A.M., 1-12-82. Drilled out cement & retainer 1939-2040'. Tested csg to 1500# 10:30 to 11:00 A.M., 1-15-82. OK.
5. Installed injection equipment. Test and return to injection.

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



TITLE Asst. Dist. Mgr.

DATE 2-1-82

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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WELL FILE

Form C-103  
Revised 10-1-78

SA. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

B-155

SUNDY 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.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER	7. Unit Agreement Name Central Vacuum Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Central Vacuum Unit		
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 67		
4. Location of Well UNIT LETTER G FEET FROM THE LINE AND 1980 FEET FROM THE North LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMPM.	10. Field and Pad of Wildcat Vacuum Grayburg San Andres		
11. Elevation (Show whether DF, RT, GR, etc.) 4007' (GR)	12. County Lea		

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

OTHER

PLUG AND ABANDON

CHANGE PLANS

REMEDIAL WORK

COMMENCE DRILLING OPNS.

CASING TEST AND CEMENT JOB

OTHER

RRepair Water Flow

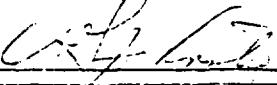
ALTERING CASING

PLUG AND ABANDONMENT

17. 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. Rigged up. Pull rods and pump. Install BOP Pull Tubing.
2. Set RBP @ 3900'.
3. Perforate  $5\frac{1}{2}$ " casing W/2 Js @ 1565'.
4. Set cement retainer @ 1460'. Cement to surface  $5\frac{1}{2}$ " casing perfs. @ 1565' W/200 sx. class "H" Cement containing 2% CaCl. WOC DOC. Cement would not hold.
5. Set cement retainer @ 1466'. Cement to surface casing perfs @ 1565' W/250 sx Class "H" containing 2% CaCl and 1000 gals. FLO-CHEX. WOC. DOC.
6. Tested casing to 1800# for 30 minutes 6:30-7:00 AM, 8-18-83. Tested OK.
7. Install production equipment. Returned to production.

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

SIGNED  TITLE Asst. Dist. Mgr.

DATE 8-26-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE AUG 29 1983

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WELL FILE

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State Fee 

5. State Oil &amp; Gas Lease No.

B-1258-1

## 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER-  2. Name of Operator <b>TEXACO Inc.</b>	7. Unit Agreement Name  8. Farm or Lease Name <b>New Mexico 'AE' Sta-</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico</b>		88240	9. Well No. <b>25</b>
4. Location of Well UNIT LETTER <b>B</b> , LINE, SECTION <b>990</b>		FEET FROM THE <b>North</b> LINE AND <b>1780</b> FEET FROM THE <b>East</b> LINE, SECTION <b>11</b> TOWNSHIP <b>18-S</b> RANGE <b>34-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Vacuum Abo Reef</b>
		15. Elevation (Show whether DF, RT, GR, etc.) <b>4000' (GR)</b>	12. County <b>Lea</b>

## 16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Repair Water Flow <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

1. Rigged up. Pull rods, pump & tubing.
2. Set RBP @ 4575' & spot 20' Sand on plug.
3. Perforate 5  $\frac{1}{2}$ " Csg w/2-JS @ 3050'.
4. Set cement retainer @ 3000'. Cement perfs. @ 3050' w/200 Sx. Class 'H' Neat Cement. WOC. Ran temperature survey. Top of cement @ 2900'. DOC. Failed to hold pressure.
5. Set cement retainer @ 3000'. Cement perfs @ 3050' w/500 Sx. Class 'H' Neat Cement. & 100 Sx. Class 'H' cement containing 2% CaCl. WOC. Ran temperature survey. Top of cement @ 2900'.
6. Perforate 5  $\frac{1}{2}$ " Csg W/2-JS @ 1785'.
7. Set cement retainer @ 1740'. Cement perfs @ 1785' W/375 Sx. Class 'H' cement containing 2% CaCl. Cement circulated. Squeeze w/add'l 225 Sx. Cement. WOC. DOC. Test. Did not hold.
8. Set cement retainer @ 1740'. Squeezed perfs. @ 1785' W/10 Bbls. Flochek & 100 Sx. Class 'C' Thixset cement containing 2% CaCl. WOC. DOC. Test. Tested OK.
9. Install pumping equipment. Test & return to production. Compl. 6-23-81.

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

SIGNED

TITLE Asst. Dist. Mgr.

DATE 6-25-81

Date Signed By

Larry Sander

APPROVED BY

CONDITIONS OF APPROVAL

TITLE

DATE

JUN 29 1981

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WELL FILE

**WELL CONSERVATION DIVISION**  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>B-871</b>	

**SUNDY 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.

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name <b>West Vacuum Unit</b>
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>West Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>35</b>
4. Location of well UNIT LETTER <b>N</b> , 1980 FEET FROM THE <b>West</b> LINE AND <b>660</b> FEET FROM THE <b>South</b> LINE, SECTION <b>34</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> NEPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
11. Elevation (Show whether DF, RT, GR, etc.) <b>4041' (DF)</b>	12. County <b>Lea</b>

## 16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER <input type="checkbox"/>		Repair Water Flow <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

1. Rigged up. Pull tubing & Subm. pump.
2. Set RBP @ 4000' & dump 20' Sand on plug. Perforate  $5\frac{1}{2}$ " Csg w/2-JS @ 1560'.
3. Set cement retainer @ 1500'. Cement perforations @ 1500' w/420 Sx. Class 'H' Cement containing 2% CaCl. Cement circulated. Squeeze w/add'l 300 Sx. Class 'H' cement containing 2% CaCl. WOC. DOC. Tested OK.
4. Install Subm. pump. Test & return to production.

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

J. Schaffer TITLE Asst. Dist. Mgr. DATE 6-4-81

Moved by Jerry Signature: Jerry Title:  Date: July 1, 1981

NOTICES OF APPROVAL, IF ANY: Date:

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ENERGY & MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

VIEW FILE

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No.
B-1446

SUNDY 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name <u>West Vacuum Unit</u>
2. Name of Operator <u>Texaco Inc</u>	8. Farm or Lease Name <u>West Vacuum Unit</u>
3. Address of Operator <u>P. O. Box 728, Hobbs, New Mexico 88240</u>	9. Well No. <u>49</u>
4. Location of Well UNIT LETTER <u>H</u> , 1980 FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>3</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> NWPM.	10. Field and Pool, or Wildcat <u>Vacuum Grayburg San Andres</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>4030' (DF)</u>	12. County <u>Lea</u>

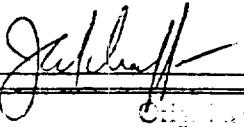
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>		Repair Waterflow	

17. 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. Rigged up. Pull rods, pump & tubing. Install BOP.
2. Set RBP @ 3658'. Perforate 5 1/2" Csg w/2 JS @ 1645'.
3. Set cement retainer @ 1604'. Cemented to surface through perfs. @ 1645' w/720 sx. class 'H' cement. Follow with squeeze using 350 sx. class 'H' cement. WOC. DOC. Tested OK.
4. Install production equipment. Test & return to production.

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

SIGNED   
John L. Clements

TITLE Asst. Dist. Mgr.

DATE 5/6/81

Ch. 103  
Les Clements

APPROVED BY Oil & Gas Unit

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT**

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OPERATOR	

WEEK  
FILE

**WILDLIFE CONSERVATION DIVISION**

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
<b>B-3936</b>	

## SUNDY 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.)

- |  |                                   |                 |  |
|--|-----------------------------------|-----------------|--|
| BIL WELL <input checked="" type="checkbox"/>   | GAS WELL <input type="checkbox"/> | OTHER-<br>_____ | 7. Unit Agreement Name<br><b>West Vacuum Unit</b>                  |
| 2. Name of Operator<br><b>Texaco Inc.</b>  |                                   |                 | 8. Farm or Lease Name<br><b>West Vacuum Unit</b>                   |
| 3. Address of Operator<br><b>P. O. Box 728, Hobbs, New Mexico 88240</b>  |                                   |                 | 9. Well No.<br><b>41</b>   |
| 4. Location of Well<br>UNIT LETTER <b>B</b> , FEET FROM THE <b>330</b> LINE AND <b>North</b> FEET FROM<br>THE <b>East</b> LINE, SECTION <b>4</b> TOWNSHIP <b>18-S</b> RANGE <b>34-E</b> N.M.P.M. |                                   |                 | 10. Field and Pool or Wildcat<br><b>Vacuum Grayburg San Andres</b> |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><b>4048' (DF)</b>   |                                   |                 | 12. County<br><b>Lea</b>   |

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

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 OPS.	<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 _____	<input type="checkbox"/>			OTHER <u>Repair Water Flow</u>	<input checked="" type="checkbox"/>		X

17. 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. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
  2. Set RBP @ 3998' & dump 20' Sand on plug. Perforate 5  $\frac{1}{2}$ " Csg w/2-JS @ 1643'.
  3. Set cement retainer @ 1550'. Cement perfs. @ 1643' w/300 Sx. Class 'H' Cement containing 2% CaCl. Cement circulated. Squeeze w/add'l 200 Sx. Class 'H' Cement. WOC. DOC. Tested OK.
  4. Install pumping equipment. Test & return to production.

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

SIGNED Stiles H. Morris

Asst. Dist. Mgr.

6-4-81

6-4-81

Orly, S. 1998

**ANSWER** *What is the name of the author of the book?*

**RATE**

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SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

B-1576

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name <b>West Vacuum Unit</b>
2. Name of Operator <b>Texaco Inc.</b>	8. Farm or Lease Name <b>West Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>17</b>
4. Location of Well UNIT LETTER <b>H</b> FEET FROM THE <b>North</b> LINE AND <b>660</b> FEET FROM THE <b>East</b> LINE, SECTION <b>33</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> NWPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>4058' (GR)</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER _____
REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <b>Repair Water Flow</b> <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work.) SEE RULE 103.

1. Rigged up. Pull rods & tubing.
2. Set RBP @ 4000'. Spot 20' sand on plug.
3. Perforate 5 1/2" Csg. w/2-JS @ 1560'. Cement to surface perfs. @ 1560' w/530 sx. class 'H' cement containing 2% CaCl.
4. Install pumping equipment. Test & return to production.

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

SIGNED J. Schaff

TITLE **Asst. Dist. Mgr.**

DATE **5/6/81**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION C.  
P. O. BOX 2068  
SANTA FE, NEW MEXICO 87501

Form C-102  
Revised 10-1-72

Well File

1. Indicate Type of Lease	
State	<input type="checkbox"/>
Fee <input checked="" type="checkbox"/>	
2. State Oil & Gas Lease No.	

SLANDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG A WELL TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT IN FORM C-101 FOR SUCH PROPOSALS.

<input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name <b>SKELLY PENROSE A UNIT</b>
Operator <b>EXACO PRODUCING INC.</b>	8. Firm or Lease Name
Address <b>P.O. Box 728, Hobbs, N.M. 88240</b>	9. Well No. <b>51</b>
Letter G 1980 FEET FROM THE LINE AND LINE SECTION 10° TOWNSHIP 23S RANGE 37E FEET FROM	10. Field and Pool, or W/Hdcs <b>LANGLIE MATTIX</b>
11. Elevation (Show whether DF, RT, GR, etc.)	12. County <b>LEA</b>

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	REPAIRED WATER FLOW <input type="checkbox"/>
OTHER <input type="checkbox"/>	REPAIRED WATER FLOW <input type="checkbox"/>

13. Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed.)  
SEE RULE 1103.

- .. Rigged up. TOH w/production equipment.
- .. Set 7" CIBP at 3200', perfed 2 sqz holes at 1225'.
- .. Set 7" cmt ret. at 1105'. Sqzd. perfs at 1225' w/175 sx cl "H". Pld. out of cmt. ret.
- .. Sqzd. 7" csg. perfs at 1225' w/1000 gal Flochek, 200 sx cl "H" and 3# CaCl. Over displ. w/20 bbls. P/20 bbls. 10# CaCl wtr., 1000 gal Flochek and 200 sx cl "H" w/5# GIL, 10# Calsel, 1/4# Flochek, 6 1/2# ST and 3# SD. Over displ. w/20 bbls. pld out of ret and revers out 20 bbls.
- .. Sqzd. 7" csg. w/600 gal Flochek, 100 sx cl "H" w/5# GIL, 10# Calsel, 1/4# Flochek, 6 1/2# ST and 3# Sp/sx.
- .. Ran CBL from 1100' to surf.
- .. Perfed at 596' w/2 JS. POH w/pkr. P/300 sx cmt and additives.
- .. DOC to 612'.
- .. P/500 sx cl "H" w/3% CaCl.
- .. P/125 sx cl "H" w/3% CaCl.
- .. DOC to top of ret at 1105'. DOC and ret 1225'.
- .. Tagged CIBP at 3140' and drld out. C/O to 3625' TD.
- .. TIH w/production equipment., test and place on production.

This form is true and complete to the best of my knowledge and belief.

17. Sign

TITLE DATE SIGNATURE

9-16-77

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# OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease  
State  Fee   
S. State Oil & Gas Lease No.  
**B-1113-1**

## SUNDY 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>TEXACO INC.</b>	8. Farm or Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>105</b>
4. Location of Well UNIT LETTER <b>E</b> 1980 FEET FROM THE LINE AND <b>484</b> FEET FROM THE <b>West</b> LINE, SECTION <b>6</b> TOWNSHIP <b>18-S</b> RANGE <b>35-E</b> NWPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3942' (GR)</b>	12. County <b>Lea</b>

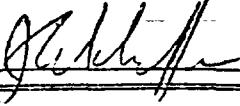
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> <b>Repair Water Flow</b>
OTHER <input type="checkbox"/>			

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3884'. Test Csg. Leak between 731' - 790'. Pull pkr.
3. Set cement retainer @ 672'. Cement leak w/200 Sx. Class 'C' Thix-Set Cement containing 3% CaCl. WOC. DOC. Tested OK.
4. Install Subm. Pump. Test & return to production.

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

SIGNED  TITLE **Asst. Dist. Mgr.**

DATE **6-4-81**

Approved by **J.C. Johnson**

TITLE \_\_\_\_\_

DATE **6-4-81**

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

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OPERATOR	

WELL FILE

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No.
B-1861

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name Central Vacuum Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Central Vacuum Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 86
4. Location of Well UNIT LETTER 0 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 31 TOWNSHIP 17-S RANGE 35-E NMPM.	10. Field and Pool, or Wildcat Vacuum Gravburg San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3968' (GR)	12. County Lea

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 OPS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Repair Water Flow
OTHER <input type="checkbox"/>			

17. 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. Pull rods, Pump & tubing.
2. Set RBP @ 3800'.
3. Perforate 7" Csg W/2-JS @ 1550'.
4. Set cement retainer @ 1460'. Cemented through 7" Csg perfs @ 1550' W/400 Sx. Class 'C' Thixset cement containing 3% CaCl. Ran temperature survey. Top of cement @ 1300'. DOC & retainer to 1550'. Had flow.
5. Spot 20% HCL across perfs @ 1550'. Set cement retainer @ 1450'. Squeeze perfs @ 1550' W/1500 Gals. Flocek & 400 Sx. Class 'C' Thixset cement containing 3% CaCl. Did not circulate. DOC & retainer. Had flow.
6. Set cement retainer @ 1450'. Squeeze Perfs 1550' W/200 Sx. Class 'H' cement W/2% CaCl & 500 Gals. Flocek. WOC. DOC. Tested OK.
7. Install pumping equipment. Test & place on production, 8-13-81.

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

SIGNED

TITLE Asst. Dist. Mgr.

DATE 8-24-81

APPROVED BY

CONRAD G. STANLEY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

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OPERATOR	

Well File

5a. Indicate Type of Lease

State

Fed

5. State Oil & Gas Lease No.

B-155

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name <u>Central Vacuum Unit</u>		
2. Name of Operator <u>Texaco Inc.</u>	8. Firm or Lease Name <u>Central Vacuum Unit</u>		
3. Address of Operator <u>P.O. Box 728, Hobbs, New Mexico 88240</u>	9. Well No. <u>77</u>		
4. Location of Well UNIT LETTER <u>I</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>36</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> N.M.P.M.	10. Field and Pool or Wildcat <u>Vacuum Grayburg San Andres</u>		
11. Elevation (Show whether DE, RT, CH, etc.) <u>3985' (GR)</u>	12. County <u>Lea</u>		
16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOA <input type="checkbox"/> OTHER <u>Repair water flow</u> <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Pull production equipment.
2. Set RBP @ 3800'. Spot sand on plug.
3. Perforate 5½" Csg @ 1555' w/2-JSPF.
4. Set cement retainer @ 1460'.
5. Cemented w/350 sx class 'H' cement. Cement did not hold.
6. Set cement retainer @ 1460'. Cement perfs @ 1555' w/250 sx. class 'H' cement & 1500 gals flocek. WOC. DOC.
7. Tested 5½" Csg. to 600# for 30 minutes, 9:30-10:00 AM, 11-4-81. Tested OK. Job complete 10:00 AM, 11-4-81.
8. Install pumping equipment. Test & place on production.

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

SIGNED

Cert. Signed by

Jerry Sexton

Dist. I, Sub.

TITLE Asst. Dist. Mgr.

DATE 11-12-81

APPROVED BY

TITLE

DATE

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P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-77

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.

B-1501

**SUNDY 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>65</b>
4. Location of Well UNIT LETTER <b>E</b> 1987 FEET FROM THE THE <b>West</b> LINE, SECTION <b>31</b> TOWNSHIP <b>17-S</b> RANGE <b>35-E</b> FEET FROM LINE AND <b>North</b> 620 NMPM.	10. Field and Pool or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3985' (GR)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	Repair Water Flow <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>			

17. 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.

- Rigged up. Pull rods, pump & tbg.
- Set RBP @ 3625' & spot 20' Sand on plug.
- Perforate 7" Csg W/2-JS @ 1540'.
- Set cement retainer @ 1458'. Cement perfs. @ 1540' W/300 Sx. Class 'H' cement containing 2% CaCl & 300 Sx. Class 'C' cement W/3% CaCl Thix-Set. Cement circulated.
- Squeeze W/Add'l 40 Sx. Class 'H' & 300 Sx. Class 'C' Cement. WOC. DOC. Tested OK.
- Install pumping equipment. Test & return to production 7-21-81.

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

SIGNED \_\_\_\_\_

*J. L. Schaff*

TITLE Asst. Dist. Mgr.

DATE 7-23-81

*Asst. Dist. Mgr.*  
*July 23, 1981*

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

*JUL 27 1981*

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OIL CONSERVATION DIVISION

P. O. BOX 2086  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

WELL FILE

3a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
3. State Oil & Gas Lease No.	

SUNDY 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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

4. Name of Operator

Texaco Producing Inc.

5. Address of Operator

P.O. Box 728, Hobbs, N.M. 88240

6. Location of Well

UNIT LETTER B FEET FROM THE 330 LINE AND North FEET FROM 1650

THE East LINE, SECTION 8 TOWNSHIP 19S RANGE 38E NMPM.

11. Elevation (Show whether DF, RT, GR, etc.)  
3616' DF

7. Unit Agreement Name

8. Farm or Lease Name  
Mexico N.M.

9. Well No.  
1

10. Field and Pool, or Wildcat  
Hobbs Grayburg San Andres

12. County

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS   
OTHER \_\_\_\_\_

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER \_\_\_\_\_

ALTERING CASING   
PLUG AND ABANDONMENT   
OTHER \_\_\_\_\_

17. 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. Pulled pump and ran RRP to 3002'. Shot 2 holes at 2500'.
2. Set pkr. at 2079'. P/20 bbls. Sqzd. w/200 sx cl "H" w/3% CaCl. Displ. amt. to 2400'. POH w/pkr.
3. Ran log.
4. Perfed 2 holes at 1625'. Ran pkr. and set at 1250'. Cmtd. w/400 sx cl "H". Circ. amt. out 8 5/8" csg. Displ. amt. to 1525'. POH w/pkr. Sqz. holes at 1625'.
5. DOC 2349-2520'. Tstd. to 500#.
6. Ran pump. Test and place on production.

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

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

APPROVED BY \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY

TITLE Dist. Opr. Mgr.

DATE 7/26/85

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

NO. OF TENTS REQUESTED	
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FILE	<input type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
OPERATOR	<input type="checkbox"/>

5a. Indicate Type of Lease
State <input type="checkbox"/> Fed <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO FILL OR TO OFFER OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR DRILLING OR REOPENING OF WELL FOR SUCH PROPOSALS.")

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	Injection well	7. Unit Agreement Name Myers Langlie Mattix Unit	
2. Name of Operator Texaco Producing Inc.		8. Form or Lease Name	
3. Address of Operator P.O. Box 728, Hobbs, N.M. 88240		9. Well No. 79	
4. Location of well UNIT LETTER E 2310 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE, SECTION 33 TOWNSHIP 23S RANGE 37E RMPM.		10. Field and Pool, or Wildcat Langlie Mattix 7-Riv. Out	
11. Elevation (Show whether DF, RT, GR, etc.)		12. County Lea	
16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> Repair csg. leak. <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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. Rig up. PCH w/injection equipment.
2. Locate casing leak, establish injection rate into leak if possible.
3. TIH w/CIBP to + 2930' and set CIBP.
4. Perforate 7" casing at leak depth if necessary to establish rate, if leak is found above 1250', perforate casing at 1250'.
5. TIH w/retainer to 150' above the casing leak and set retainer.
6. Squeeze leak using class "H" cement. Circulate cement if possible. Circulate out excess cement. WOC 24 hours.
7. Drill out retainer and cement to top of CIBP.
8. Drill out CIBP and clean out casing (7" and 4 1/2" casing) to PBID 3620'.
9. TIH w/injection tbg. and pkr. to + 3364' and set pkr. Return well to injection.

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

*W. B. Lile*

TITLE Dist. Opr. Mgr.

DATE 8/21/85

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**WELL FILE UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**BUREAU OF ID MANAGEMENT**

SUBMIT IN TRIPPLICATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

3. LEASE DESIGNATION AND SERIAL NO.

LC-061689

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Cotton Draw Unit

8. FARM OR LEASE NAME

38

9. WELL NO.

38

10. FIELD AND POOL, OR WILDCAT

Paduca Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 21, T25S R32E

12. COUNTY OR PARISH 13. STATE

Lea

NM

14.

15. ELEVATIONS (Show whether DP, ST, GR, etc.)

30-025-08212

3404' KB

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

KILOOT OR ACIDIZE

REPAIR WELL

(Other)

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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.)

- 1) MIRU Pulling Unit. Installed BOP.
- 2) Went in hole with 4 $\frac{1}{2}$ " cement retainer on 2 3/8" tubing. Set retainer at 4047'. Squeezed perfs 4604'-4647' with 50 sx class "H" with 2% CaCl<sub>2</sub>.
- 3) Stung out of retainer. Spotted 10 sx plug on top. POH.
- 4) Perforated 4 $\frac{1}{2}$ " casing with 2 shots at 1225'.
- 5) Went in hole with 4 $\frac{1}{2}$ " cement retainer on 2 3/8" tubing. Set retainer at 242'. Pumped 350 sx class "H" with 2% CaCl<sub>2</sub> through perfs. Circulated 30 sx.
- 6) Stung out of retainer. Circulated 4 $\frac{1}{2}$ " casing with 50 sx class "H" with 2% CaCl<sub>2</sub>, to surface.
- 7) Removed BOP. Installed marker. Changed status to P&A effective 02/04/86.

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

SIGNED

W.B. Clark

TITLE District Oper. Manager

DATE 02/21/86

(This space for Federal or State office use)

APPROVED BY Charles J. Miller  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE 8-6-84

\*See Instructions on Reverse Side



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ENERGY AND MINERALS DEPARTMENT

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OPERATOR	

JIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

8. Indicate Type of Lease

State

Fee

9. State Oil & Gas Lease No.

B-1446

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	Vacuum Grayburg San Andres
2. Name of Operator <b>Texaco Inc.</b>			Vacuum Grayburg San Andres
3. Address of Operator <b>P.O.Box 728, Hobbs, New Mexico 88240</b>			9. Well No. <b>38</b>
4. Location of Well UNIT LETTER <b>G</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM			Vacuum Grayburg San Andres
TOWNSHIP <b>18-S</b> RANGE <b>34-E</b> N.M.P.M.			
TMC <b>East</b> LINE, SECTION <b>2</b>			
15. Elevation (Show whether DF, RT, GR, etc.) <b>4022' (DF)</b>			12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONME <sup>T</sup> <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <b>Repair water flow</b>	<input checked="" type="checkbox"/>

17. 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. Rigged up. Pull rods & pump. Install BOP. Pull tbg.
2. Set RBP @ 3600' & spot 20' sand on plug.
3. Perforate 5½" Csg w/2-Js @ 1625'.
4. Set cement retainer @ 1575'. Cemented perfs. @ 1625' w/450 sx class H cement containing 2% CaCl. Cement did not circulate. Top of cement 150' by temperature survey. DOC. Set retainer @ 1575'.
5. Squeeze w/1000 gals. flocale & 300 sx thickset cement containing 3% CaCl. WOC.DOC. Tested w/800# for 30 minutes, 8:00-8:30 Am, 11-30-81. Tested OK. Pull RBP.
6. Acidize open-hole 4079'-4710' w/500 gals. 15% NE Acid.
7. Install pumping equipment. Test & return to production.

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

SIGNED 

TITLE **Asst. Dist. Mgr.**

DATE **12-10-81**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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## ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-70

5a. Indicate Type of Lease

State Fee 

5. State Oil &amp; Gas Lease No.

B-1031

## SUNDY 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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER -	7. Unit Agreement Name -
2. Name of Operator <b>TEXACO Inc.</b>			8. Farm or Lease Name <b>New Mexico 'AB' Sta</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>			9. Well No. <b>3</b>
4. Location of Well UNIT LETTER <b>0</b> FEET FROM THE <b>South</b> LINE AND <b>1980</b> FEET FROM			10. Field and Pool, or Wildcat <b>Vacuum Abo Reef</b>
THE <b>East</b> LINE, SECTION <b>6</b> TOWNSHIP <b>18-S</b> RANGE <b>35-E</b> NMFM.			
15. Elevation (Show whether DF, RT, GR, etc.) <b>3970' (GR)</b>			12. County <b>Lea</b>

16. 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"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	COMMENCE DRILLING OPS.	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>	CASING TEST AND CEMENT JOBS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>		<input type="checkbox"/>	OTHER	<input type="checkbox"/>
<b>Repair Water Flow</b>					

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 4000' & dump 20' Sand on plug.
3. Perforate 7 5/8" Csg W/2-JS @ 1600'. Set cement retainer @ 1507'.
4. Cement W/450 Sx. Class 'H' cement containing 2% CaCl. WOC. DOC. Tested OK.
5. Install pumping equipment. Test & place on production.

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

SIGNED J. Hatchett

TITLE Asst. Dist. Mgr.

DATE 9-17-81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5. Indicate Type of Lease

State

Fee

6. State Oil & Gas Lease No.

89019

SUNDY 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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name New Mexico AN State
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 4
4. Location of Well UNIT LETTER P FEET FROM THE LINE AND FEET FROM THE LINE, SECTION 22 TOWNSHIP 14-S RANGE 660 NMPL.	10. Field and Pool or Wildcat Saunders permo bean Upper
11. Elevation (Show whether DF, RT, GR, etc.) 4214' (GR)	12. County Lea

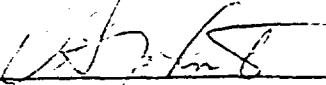
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER <input type="checkbox"/>	Repair Waterflow		

17. 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.

- RIG UP. INSTALL BOP.
- SPOT 30' (5 SX.) SAND ON TOP OF RBP @ 8500'.
- SET CEMENT RETAINER @ 4775'. CEMENT CASING LEAK @ APPROX. 4846' - 4877' W/ 450 SX. 50-50 POZMIX AND CLASS H CEMENT CONTAINING 2% BENTONITE.
- SQUEEZE W/ ADDL. 800 SX. CLASS H NEAT CEMENT. RUN TEMPERATURE SURVEY TO DETERMINE TOP OF CEMENT. WOC. DOC. TEST.
- SET PAKER @ 9650'. TREAT W/ 500 GALS. MUD REMOVAL ACID AND FLUSH.
- INSTALL PRODUCTION EQUIPMENT. TEST AND RETURN TO PRODUCTION.

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

SIGNED 

ASST DIST MGR

TITLE

DATE August 23, 1988

APPROVED BY

DISTRICT SUPERVISOR

TITLE

DATE AUG 24 1988

APPROVAL, IF ANY:

NEW MEXICO

EA

WELL 1 E

New Mexico "AN" 4 8-9-83 5½" @ 10,000 RECOMMENDED REMEDIAL WORK:  
 State (EXP) TX WI 100% Est. #3-3641  
Lia

10,000  
 9999  
 PB

MIRU Monument WS 8-9-83. POH w/rds & tbg. WIH w/5½" cmt ret set @ 4759'. Halli cmt'd 5½" x 8-5/8" ann w/300 sx Cl H 50-50 poz & 2% bentonite. Closed csg hd valve. (Csg leak btwn 4846' to 4877') Sqzd out 275 sx Cl H NEAT. Sqz Press 2100#. Revsd out 25 sx. JC 5:30 PM, 8-9-83. POH w/tbg RU Jarrel Services. Ran temp survey. TOC @ 2100'. JC 1 AM, 8-10-83.

No. of Days: Est: 5 Comm: 1

Cash: Est: \$28,000 Comm: \$8,000

8-11-83

GIH w/4-5/8" bit, 6-3½" DC's on 2-7/8" tbg. Drld cmt ret & cmt fr 4759-4910'. Tstd 5½" csg to 1000# fr 5-5:30 PM, 8-10-83. Held OK. POH.

No. of Days: Est: 5 Comm: 2

Cash: Est: \$28,000 Comm: \$11,000

8-12/18-83

GIH w/2-7/8" tbg. Circ sd off 5½" RBP. Unset pkr. POH. GIH w/2-7/8" tbg & 5½" pkr. PSA 9424'. RU Univ & A/5½" csg prfs 9730-9912' w/500 gals mud removal acid. Max P-3000#. Min P-500#.

AIR 5 BPM. ISIP-Vac. JC 11:15 AM, 8-13-83. POH w/tbg & pkr. Retn well to production 8-13-83.

P/24 hrs, 11 BO, 5 BSW. Rods parted. RU Permian WS. Fshd rds. Chgd out SSP. P/8 hrs, No Gauge.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

8-19/25-83

Last 24 hrs, P/O BO, 30 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

8-26/31-83

Last 24 hrs, P/O BO, 30 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

9-1-83

P/24 hrs, 0 BO, 30 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

9-2/8-83

Last 24 hrs, Pmpd 0 BO, 30 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

9-9/15-83

SI. Csg on vac. Plcd well on pmp 9-14-83. Pmpg-no gauge.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

9-16/22-83

Last 24 hrs, Pmpd 0 BO, 34 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

9-23/29-83

Last 24 hrs, pmpd 0 BO, 31 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

9-30-83

P/24 hrs, 0 BO, 33 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

10-1/3-83

P/72 hrs, 0 BO, 95 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

10-4/6-83

Last 24 hrs, pmpd 1 BNO, 28 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

10-7/13-83

Last 24 hrs, pmpd 0 BO, 31 BSW.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

10-14/20-83

On 24 hr PT end 9 AM, 10-17-83. P/0 BO, 15 BW. Grav 40.5°. GOR-TSTM. 7.5x96" SPM. 1½" SSP.

Prod fr Saunders ~~Thermo~~ Penn 5½" csg prfs 9730-9912'. Prod prior to W/O ½ BO. Workover

Unsuccessful. Chg status fr W/O to Pmpg.

No. of Days: Est: 5 Comm: 5

Cash: Est: \$28,000 Comm: \$15,400

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form 103  
Rev. 10-1-78

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WELL FILE

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/>
5. State Oil Tax Lease No.
B-1 06-1

SUNDY 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.)

OIL WELL  GAS WELL  OTHER -

6. Name of Operator

TEXACO Inc.

7. Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

8. Location of Well

UNIT LETTER H FEET FROM THE LINE AND 2310 FEET FROM  
THE North LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)  
3890' (DF)

12. County  
Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

OTHER

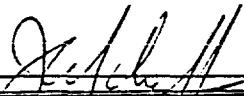
CASING TEST AND CEMENT JOBS

Repair Water Flow

16. 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. Rigged up. Pull rods, pump & tubing.
2. Set RBP @ 4000'.
3. Perforate 2 7/8" Csg W/2-JS @ 3100'. Set cement retainer.
4. Cement perfs @ 3100' w/500 Sx. Class 'H' cement w/2% CaCl. Temperature survey indicated top of cement @ 2731'. No cement behind 2 7/8" Csg. DOC.
5. Spot 250 Gals. 15% Acid over perfs. @ 3100'. Cement w/500 Gals. Flocek & 200 sx. Class 'H' cement w/2% CaCl. WOC. DOC. Tested. Had flow.
6. Spot 125 Gals. 15% Acid over perfs. @ 3100'. Cement w/1000 gals. Flocek & 260 sx. Thix set cement. WOC. DOC. Tested ok.
7. Install pumping equipment. Test & return to production.

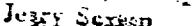
17. I hereby certify that the information above is true and complete to the best of my knowledge and belief.



TITLE Asst. Dist. Mgr.

DATE 9-14-81

Un. S. S. by  
Jerry Sorenson

APPROVED BY 

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

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OPERATOR	

WELL FILE

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

SA. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
3. State Oil & Gas Lease No.	
B-1722-1	

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.			8. Farm or Lease Name N.M. 'N' State
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240			9. Well No. 6
4. Location of Well UNIT LETTER L, 460 FEET FROM THE West LINE AND 1980 FEET FROM THE			10. Field and Pool, or Wildcat Vacuum Glorieta, Va Abo N., Vac. Wolfcamp
THE South LINE, SECTION 30 TOWNSHIP 17-S RANGE 35-E NMPLM.			
15. Elevation (Show whether DF, RT, CR, etc.) 4003' (DF)			12. County Lea

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

NOTICE OF INTENTION TO:

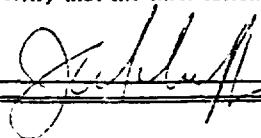
SUBSEQUENT REPORT OF:

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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER <input type="checkbox"/>		Repair Water Flow <input checked="" type="checkbox"/>	

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Pull rods & pump in Glorieta String.
2. Set RBP @ 4000' in Glorieta, Wolfcamp & Abo strings. Plugs tested OK. Spot 20' Sand on plugs.
3. Perforate 9 5/8" x 2 7/8" Csg W/2-shots @ 1600'.
4. Cement perfs @ 1600' W/700 Sx. Class 'H' cement containing 2% CaCl. Cement circulated. Squeeze W/add'l. 75 Sx. Class 'H' cement. WOC. DOC. Tested OK.
5. Install pumping equipment. Test & place on production, 8-13-81.

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

SIGNED 

TITLE Asst. Dist. Mgr.

DATE 8-24-81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
OPERATOR	

WELL FILE

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> . Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-1722-1

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 - C" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name -
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name New Mexico 'N' Stat
3. Address of Operator P.O. Box 728, Hobbs, New Mexico 88240	9. Well No. 7
4. Location of Well UNIT LETTER E 330 FEET FROM THE West LINE AND 1800 FEET FROM THE North LINE, SECTION 30 TOWNSHIP 17-S RANGE 35-E NMPM.	10. Field and Pool, or Wildcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, CR, etc.) 4001' (DF)	12. County Lea

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER _____	Repair Water Flow		

17. 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. Rigged up. Pull rods, pump & Tubing.
2. Set RBP @ 4000'. Perforate 2 7/8" & 8 5/8" Csg W/2-JS @ 1685'.
3. Cemented perfs @ 1685' W/400 Sx. Class 'H' Cement containing 2% CaCl.  
Did not circulate. Ran temperature survey. TOC 300'. WOC. DOC.  
Tested OK.
4. Install pumping equipment. Test & return to production.

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

Orig. Signed by  
Les Clements

APPROVED BY

Oil & Gas Insp.

CONDITIONS OF APPROVAL, IF ANY:

TITLE Asst. Dist. Mgr.

DATE 8-13-81

TITLE

DATE

STATE OF NEW MEXICO  
ENERGY & MINERALS DEPARTMENT

DATE OR COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	<i>16 F</i>
LAND OFFICE	
OPERATOR	

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

B-1306

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>TEXACO Inc.</b>	8. Form of Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>96</b>
4. Location of Well UNIT LETTER <b>B</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE, SECTION <b>6</b> TOWNSHIP <b>18-S</b> RANGE <b>35-E</b> NMFM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
11. Elevation (Show whether DF, RT, GR, etc.) <b>3982' (DF)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Repair Casing Leak <input type="checkbox"/>
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	

17. 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. Rigged up. Pull rods, pump & tubing.
2. Set CIBP @ 4080'.
3. Ran 4" OD 11.34# Csg & set @ 4061'.
4. Cemented 4" Csg w/425 Sx. Class 'H' Neat Cement. Cement circulated. WOC. DOC & test. Tested OK.
5. Acidize open-hole 4105-4705' w/2550 Gals. 15% NEFE Acid.
6. Install pumping equipment. Test & return to production.

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

TITLE Asst. Dist. Supt.

DATE 4-23-81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF STATE RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.B.	
LAND OFFICE	
OPERATOR	

L CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

WELL FILE

SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
SB. State Oil & Gas Lease No.
B-1722

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>11</b>
4. Location of Well UNIT LETTER <b>E</b> 1980 FEET FROM THE <b>North</b> LINE AND <b>621</b> FEET FROM THE <b>West</b> LINE, SECTION <b>30</b> TOWNSHIP <b>17-S</b> RANGE <b>35-E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>4002' (DF)</b>	12. County <b>Lea</b>

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/> <b>Repair Water Flow</b>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1003.

1. Rigged up. Pull production equipment.
2. Set RBP @ 3900' & dump 20' Sand on plug. Perforate 5 1/2" Csg w/2-JS @ 1640'.
3. Set cement retainer @ 1580'.
4. Cement 5 1/2" Csg perf @ 1640' w/400 Sx. Class 'H' Cement. Cement circulate Squeeze w/add'l 200 Sx. Class 'H' cement. WOC. DOC. Tested Csg. Tested OK.
5. Install production equipment. Test & return to production.

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

SIGNED J. A. Schaff

TITLE Asst. Dist. Mgr.

DATE 6-3-81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Date Signed by

Jerry Smith

Title \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NAME OF COMPANY OR PERSON	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

5a. Indicate Type of Lease

State

Fed

5b. State Oil & Gas Lease No.

B-1031

SUNDY 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>Texaco Inc.</b>	8. Farm or Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>117</b>
4. Location of Well UNIT LETTER <b>0</b> , FEET FROM THE <b>South</b> LINE AND <b>2310</b> FEET FROM THE <b>East</b> LINE, SECTION <b>6</b> TOWNSHIP <b>18-S</b> RANGE <b>35-E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3980' (DF)</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUS AND ABANDONMENT

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB

OTHER

- OTHER **Repair Water Flow & Treat**

17. 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. Rigged up. Pull rods, pump & tubing.
2. Set RBP @ 4009'. Perforate 3 1/2" Csg w/2-JS @ 1580'. Set cement retainer @ 1437'. Cement perfs. @ 1580' w/425 sx. class 'H' cement. Cement circulated. Squeeze 75 sx. WOC. DOC. Tested OK.
3. Install pumping equipment. Test & return to production.

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

SIGNED

TITLE **Asst. Dist. Supt.**

DATE **3/5/81**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY & MINERALS DEPARTMENT

DATE RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

JIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

5a. Indicate Type of Lease

State

Fed

5. State Oil & Gas Lease No.

B-155

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-1) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name Central Vacuum Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Central Vacuum Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 69
4. Location of well UNIT LETTER E FEET FROM THE LINE AND 1980 FEET FROM THE North LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E N.M.P.M.	10. Field and Pool, or Wildcat Vacuum Grayburg San Andreas
15. Elevation (Show whether DF, RT, GR, etc.) 4015 (DF)	12. County Lea

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER _____	Repair Water Flow <input checked="" type="checkbox"/>		

17. 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.

- Rigged up. Pull rods, pump & tubing. Install BOP.
- Set RBP @ 3000'.
- Perforate 5 1/2" Csg W/2-JS @ 1600'.
- Set cement retainer @ 1558'. Cemented perfs @ 1600' w/500 sx. Class 'C' cement containing 2% CaCl. WOC. DOC. Tested casing. Tested OK.
- Install production equipment. Test & return to production.

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

SIGNED

*[Signature]*

TITLE

Asst. Dist. Mgr.

DATE

2-24-81

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

1. DRILLER'S NAME	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

B-1030-1

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 - 103" (FORM C-103) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>12</b>
4. Location of well UNIT LETTER <b>H</b> FEET FROM THE <b>North</b> LINE AND <b>987</b> FEET FROM THE <b>East</b> LINE, SECTION <b>25</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3991' (GR)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER <input type="checkbox"/>			

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
<b>Repair Water Flow</b>	

17. 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. Rigged up. Pull rods & tubing.
2. Set RBP @ 4614'. Perforate 4  $\frac{1}{2}$ " Csg w/2-JS @ 1625'. Set cement retainer @ 1524'.
3. Set cement retainer @ 1524'. Cement perfs. @ 1625' w/275 Sx. Class 'H' Cement containing 2% CaCl. Circulated Cement. Squeeze w/150 Sx. Class 'H' Cement. WOC. DOC. Test Csg. Tested OK.
4. Install production equipment. Test & return to production.

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

*J. Schaff*

SIGNED Asst. Dist. Mgr.

DATE 6-3-81

APPROVED BY <u>Asst. Dist. Mgr.</u>	TITLE <u>Asst. Dist. Mgr.</u>	DATE <u>6-3-81</u>
CONDITIONS OF APPROVAL, IF ANY: <b>Opt 1. None</b>		

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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FILE	
U.D.G.B.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
3. State Oil & Gas Lease No. <b>E-7586</b>	

**SUNDY 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 - I" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>Texaco Inc.</b>	8. Farm or Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>8</b>
4. Location of Well UNIT LETTER <b>H</b> FEET FROM THE <b>East</b> LINE AND <b>2310</b> FEET FROM THE <b>North</b> LINE, SECTION <b>30</b> TOWNSHIP <b>17-S</b> RANGE <b>35-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3976' (GR)</b>	12. County <b>Lea</b>

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <b>Repair Water Flow</b> <input checked="" type="checkbox"/>
ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>	

17. 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. Rigged up. Pull rods, pump & tubing.
2. Set RBP @ 4030' & dump 20' sand on plug. Perforate 4 1/2" Csg. w/2-JS @ 1670'.
3. Set cement retainer @ 1607'. Cement to surface through perfs. @ 1670' w/500 sx. class 'H' cement and follow with squeeze using 150 sx. class 'H' cement. WOC. DOC & retainer. Test Csg.
4. Set cement retainer @ 1607'. Squeeze perfs. @ 1670' w/300 sx. class 'H' cement. WOC. DOC & retainer. Test Csg.
5. Set cement retainer @ 1607'. Squeeze perfs. @ 1670' w/50 sx. Thix-set cement containing 3% CaCl. WOC. DOC. Test Csg. Tested OK.
6. Install pumping equipment. Test & return to production.

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

SIGNED J. G. Huff TITLE Asst. Dist. Mgr. DATE 5/6/81

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF NEW MEXICO  
MINES AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-1C3  
Revised 10-1-73

DISTRIBUTION	<input type="checkbox"/>
TRADE	<input type="checkbox"/>
LC	<input type="checkbox"/>
I.C.S.	<input type="checkbox"/>
M-C OFFICE	<input type="checkbox"/>
EDATOR	<input type="checkbox"/>

3a. Indicate Type of Lease  
State  Fee   
3. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO EXPLORE FOR GAS IN A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL" WHICH IS DESCRIBED ON THE BACK).

GAS WELL  OTHER

7. Unit Agreement Name  
L. VAN ETEN

8. Firm or Lease Lessor

9. Operator  
**TEXACO PRODUCING INC.**

9. Well No.  
6

10. Operator  
**P.O.BOX 728, HOBBS, NM 88240**

10. Field and Block or Kilometer  
**EUNICE-MONUMENT GRAY-BURG SAN ANDRES**

11. Location  
LINE LETTER O FEET FROM TAC 660 South LINE AND 1980 FEET FROM  
LINE SECTION 9 TOWARD 20S RANGE 37E SURVEY

13. Elevation (Show whether DF, RT, CR, etc.)  
**3555 DF**

12. County  
Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

COMMERCIAL WELL   
ARTIF. ABANDON   
ALTER CASING

PLUG AND ABANDON   
COMMERCIAL WELL   
COMMERCIAL DRILLING SPOTS   
CHARGE PLANS   
CASING TEST AND CEMENT JOB   
OTHER

ALTERING CASING   
PLUG AND ABANDONMENT

Notice Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operation.) SEE RULE 1103.

1. Rigged up. POH w/production equipment.
2. Ran plug & pkr. Set Plug at 3700'.
3. LOC hole in 7" csg. at 165'.
4. Sqzd. w/100 sx cl "H" w/2% GACL. Circ. out 9 5/8" csg. Displ. to 60' at 1000#. Tag cmt. at 20' and 83'. Tstd csg.
5. Ran retrieving tool to 3685' and retrieved BP.
6. Ran log from 3850-1850'.
7. Ran pump. P/l DR S-41 in 20 BW, 6 DRS Surflo H-387 SC inhib. in 25 BW followed by 600 BW, 6 DR H-387', 1200 BW.
8. SI 36 hrs and installed production equipment and placed on production.

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

*[Signature]*

TITLE DIST. OPR. MGR.

DATE 10/21/85

NO. OF COPIES REQUESTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

## WELL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

WELL FILE

SA. Indicate Type of Lease

State Fm 

S. State Oil &amp; Gas Lease No.

B-1080-1

## SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR WELLS TO DRILL OR TO REOPEN CP. PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PLUGGING" (FORM C-101) FOR SUCH PROPOSAL.)CR. WELL  GAS WELL  OTHER 

Name of Operator

TEXACO Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER D . 760 FEET FROM THE West LINE AND 560 FEET FROM  
THE North LINE, SECTION 1 TOWNSHIP 18-S RANGE 34-E NMPLM.

7. Unit Agreement Name

8. Farm or Lease Name  
New Mexico 'M' State

9. Well No.

5

10. Field and Pool, or Wildcat:  
Vacuum Wolfcamp &  
Vacuum Glorieta

11. Elevation (Show whether DF, RT, GR, etc.)

4010' (DF)

12. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

INFORM REMEDIAL WORK	<input type="checkbox"/>
IMPROPERLY ABANDON	<input type="checkbox"/>
FULL OR AFTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
	<input type="checkbox"/>

REMEDIAL WORK	<input type="checkbox"/>
COMMENCE DRILLING OPS.	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>
OTHER <u>Cement squeeze csg annulua</u>	<input checked="" type="checkbox"/>

ALTERING CASING	<input type="checkbox"/>
PLUG AND ABANDONMENT	<input type="checkbox"/>

11. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 11C5.

1. Rigged up. Ran RA Tracer Survey.
2. Cemented 13-3/8" x 8-5/8" csg annulus w/650 sx. Class 'C' cement containing 2% CaCl. WOC & test. Tested O.K.
3. Install pumping equipment. Test and return to production.

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

*W.L. F...*

TITLE Asst. District Supt.

DATE 10-3-80

L CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

10. ORIGIN RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

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.)

CIL WELL  GAS WELL  OTHER

11. Name of Operator

TEXACO Inc.

12. Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

13. Location of Well

UNIT LETTER	D	760	FEET FROM THE	West	LINE AND	560	FEET FROM	
THE	North	LINE, SECTION	1	TOWNSHIP	18-S	RANGE	34-E	NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

4010' (DF)

7. Unit Agreement Name

8. Farm or Lease Name  
New Mexico 'M' State

9. Well No.

5

10. Field and Pool, or Wildcat:  
Vacuum Wolfcamp &  
Vacuum Glorieta

11. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

16. INFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
FILL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER Cement squeeze csg annulus

ALTERING CASING   
PLUG AND ABANDONMENT

17. 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. Rigged up. Ran RA Tracer Survey.
2. Cemented 13-3/8" x 8-5/8" csg annulus w/650 sx. Class 'C' cement containing 2% CaCl. WOC & test. Tested O.K.
3. Install pumping equipment. Test and return to production.

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

*[Signature]* TITLE Asst. District Supt.

DATE 10-3-80

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

## WIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

**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" - 1 (FORM C-101) FOR SUCH PROPOSALS.)

- |  |                                   |        |  |
|--|-----------------------------------|--------|--|
| 1. OIL WELL <input checked="" type="checkbox"/>  | GAS WELL <input type="checkbox"/> | OTHERS | 7. Unit Agreement Name<br>-                              |
| 2. Name of Operator<br><b>Texaco Inc.</b>  |                                   |        | 8. Firm or Lease Name<br><b>New Mexico "M" State</b>     |
| 3. Address of Operator<br><b>P. O. Box 728, Hobbs, NM 88240</b>  |                                   |        | 9. Well No.<br><b>7</b>                                  |
| 4. Location of Well<br>UNIT LETTER <b>F</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM<br>THE <b>West</b> LINE, SECTION <b>1</b> TOWNSHIP <b>18-S</b> RANGE <b>34-F</b> NWPM. |                                   |        | 10. Field and Pool, or Wildcat<br><b>Vacuum Wolfcamp</b> |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><b>3994' (DF)</b>   |                                   |        | 12. County<br><b>Lea</b>                                 |

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

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"/>			COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	CASING TEST AND CEMENT JOBS	<input type="checkbox"/>		<input type="checkbox"/>
OTHER _____	squeeze csg annulus		<input checked="" type="checkbox"/>	OTHER _____			

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE E 1103.

1. Rig up. Pull downhole equipment. Install BOP.
  2. Set RBP in Wolfcamp above perfs. @ approx. 5000'.
  3. Set R3P in Glorieta above perfs. @ approx. 5000'.
  4. Third 2-7/8" OD csg has no perfs.
  5. Log well.
  6. Squeeze 13-3/8" - 9-5/8" csg. annulus w/850 sx. cement. WOC. Test.
  7. Pull RBP & install production equipment. Test and return to production.

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

title Asst. Dist. Supt.

6-26-80

APPROVED BY \_\_\_\_\_  
FBI - BOSTON  
CIR 1967  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE \_\_\_\_\_ PAGE \_\_\_\_\_

**DATE** \_\_\_\_\_

## WELL FILE

N.M. "A" St. (E&L) TH WI 100% Est. #3683	7	9-9-80	(y) 2-7/8" @ 7937 (z) 2-7/8" @ 10232	RECOMMENDED REMEDIAL WORK: Shut off waterflow.	12220 10220 PB
		(y) Glorieta (z) Wolfcamp			

MIRU Well Units 9-9-80. Set RBP @ 5066' in Wolfcamp strg. Cardinal Survey ran temp & GR log fr surf to 3500'. RU Rowland Trkg. P/RA slug dwn 13-3/8" & 9-5/8" ann fr surf 1500' @ a rate of 33 per min. (Csg shoe set @ 1500'). RA slug began to spread & was dissipated by the time it reached 1554'. Halli tied onto bradenhead. Sqzd 13-3/8" X 9-5/8" ann w/850 sx Cl C 10% Calseal & 2% CaCl. Max P-1100#. Min P-100#. AIR 5 BPM. JC 4:30 PM 9-10-80. Prep to run temp log.

No. of Days: Est: 7 Comm: 2 Cash: Est: \$26,000 Comm: \$13,000  
9-12/18-80

WOC. 14 hrs. Jarrell rsn temp surv fr surf to 4000'. Shwd cmt fr 200'-1800'. Ra temp surv fr surf to 4000'. Shwd cmt fr 200'-1800'. Ran 1-5/8" DP & retrieved R fr the Wolfcamp strg. RD unit. WOC 10 hrs. Opnd bradenhead-no flow. Sqzd off. S for press build up. Plunger lift 72 hrs. 12 BNO, 28 BIW. (-0 BLW). Plunger lift 24 hrs, 12 BNO, 24 BSW. On CPT. On 24 hr OPT ending 8 AM 9-16-80. Plunger lift well, rec 13 BNO, 7 BSW. GOR-11,200. Grav 37.1. Plunger Lift. Prod fr Vacuum Wolfcamp pfs 9967-10043'. Prod before Workover 4 BO, 8 BW. Allowable 13 EOPD.

No. of Days: Est: 7 Comm: 3 Cash: Est: \$26,000 Comm: \$15,000

FINAL REPORT

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

No. or Case No. Received	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

WELL FILE

5a. Indicate Type of Lease

State

Fuel

5b. State Oil & Gas Lease No.

B-160

SUNDY 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.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER:	7. Unit Agreement Name
2. Name of Operator		TEXACO Inc.	Eunice Monument Unit
3. Address of Operator		P. O. Box 728, Hobbs, New Mexico 88240	Eunice Monument Unit
4. Location of Well		K 1980 FEET FROM THE South LINE AND 1980 FEET FROM	9. Well No.
UNIT LETTER	THE West LINE, SECTION 20 TOWNSHIP 20-S RANGE 37-E MMPL.	10. Field and Pool, or Wildcat Eunice Monument Grayburg San Andres	
		15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea
		3527' (DF)	

16. 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"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REMEDIAL WORK	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	COMMENCE DRILLING OPS.	<input type="checkbox"/>
		CASING TEST AND CEMENT JOB	<input type="checkbox"/>
		OTHER	Repair Waterflow

17. 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.

- Rigged up. Pull rods and pump. Install BOP. Pull tubing.
- Set RSP @ 3000' and spot 2 sx sand on plug.
- Perforate 5½" csg w/2-5C @ 1232'.
- Set cement retainer @ 1125'.
- Cement perfs @ 1232' w/200 sx class 'H' cement containing 2% CACI. Squeeze w/addl 250 sx Class 'H' cement containing 2% CACI. WOC. DOC. Did not hold.
- Set cement retainer @ 1150'. Cement squeeze perfs @ 1232' w/500 sx Class 'H' cement containing 2% CACI and 4000 gals Flochex. WOC. DOC.
- Tested 5½" casing to 800# for 30 minutes, 11-30-83. Tested OK. Clean out.
- Install pumping equipment. Test and return to production.

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

SIGNED  TITLE Asst. Dist. Mgr.

DATE 12-15-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

DEC 22 1983

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

DD. OF COPY RECEIVED	
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SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Foo <input type="checkbox"/>
5b. State Oil & Gas Lease No.
B-2422

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 - C-1011 FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name Eunice Monument Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Eunice Monument Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 37
4. Location of Well UNIT LETTER A FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 30 TOWNSHIP 20-S RANGE 37-E NMHM.	10. Field and Pool, or Wildcat Eunice Monument (G-SA)
11. Elevation (Show whether DF, RT, CR, etc.) 3532' DF	12. County Lea

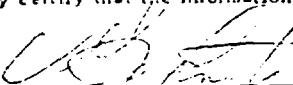
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOA <input type="checkbox"/>	Repair Water Flow <input type="checkbox"/>
OTHER _____			

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

1. PULLED RODS AND PUMP. INSTALL BOP. PULL TUBING.
2. SET RBP @ 3514' AND SPOT 2 SX SAND ON PLUG.
3. PERFORATE 7" CSG W/2-JS @ 1164'.
4. SET CEMENT RETAINER @ 1044'. CEMENT PERFORATIONS @ 1164' W/280 SX CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. SQUEEZE W/ ADDL 200 SX CLASS H CEMENT CONTAINING 2% CACL. WOC. DOC.
5. TESTED 7" CASING TO 600# FOR 30 MINUTED, 1:30-2:00 PM, 12-7-83. TESTED OK.
6. INSTALL PUMPING EQUIPMENT. TEST AND RETURN TO PRODUCTION.

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

SIGNED   
TITLE Asst. Dist. Mgr.

DATE 12-22-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

DEC 27 1983

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY & MINERALS DEPARTMENT

CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

OIL WELL	<input type="checkbox"/>
GAS WELL	<input type="checkbox"/>
FILE	<input type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
OPERATOR	<input type="checkbox"/>

*New File*

5a. Indicate Type of Lease

State  Fee

5. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

100% 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 100% PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Water Injection Well</u>	7. Unit Agreement Name <u>Skaggs Grayburg Unit</u>
2. Name of Operator <u>TEXACO Inc.</u>	8. Farm or Lease Name <u>Skaggs Grayburg Unit</u>
3. Address of Operator <u>P. O. Box 728, Hobbs, New Mexico 88240</u>	9. Well No. <u>1</u>
4. Location of well UNIT LETTER <u>K</u> 1985 FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>12</u> TOWNSHIP <u>20-S</u> RANGE <u>37-E</u> MMPC.	10. Field and Pool, or Wildcat <u>Skaggs Grayburg</u>
15. Elevation (Show whether DF, RT, CR, etc.) <u>3569 (DF)</u>	12. County <u>Lea</u>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Repair Waterflow</u> <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>			

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FILE 103.

1. Rigged up. Install BOP. Pull Packer and tubing.
2. Set RBP @ 3016' and spot 4 sx. sand on plug.
3. Perforate 7 5/8" Casing W/1-JS @ 1489'.
4. Set Cement retainer @ 1406'. Cement perforation @ 1489' W/200 sx Class "H" Cement containing 2% CACL. Cement circulated. WOC. DOC. Did not hold.
5. Set cement retainer @ 1374'. Cement perforation @ 1489' W/500 sx. Class "H" Cement containing 3% CACL. WOC. DOC. Did not hold.
6. Set cement retainer @ 1374'. Cement perforation @ 1489' W/400 SX. Class "H" Cement containing 3% CACL and 4000 gals. Flochex. WOC. DOC.
7. Tested casing to 700# for 30 minutes, 4:00-4:30 PM, 10-18-83. Tested OK.
8. Ran 2 3/8" plastic coated tubing W/pkr. and set @ 3634'. Return to injection.

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

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT SUPERVISOR

TITLE Asst. Dist. Mgr.

DATE 10-27-83

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE OCT 31 1983

CONDITIONS OF APPROVAL, IF ANY:

## ENERGY AND MINERALS DEPARTMENT

1. OR CO. RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

## IL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 12-1-

3a. Indicate Type of Lease

State FED 

3. State Oil &amp; 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 - 2" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator TEXACO INC.			8. Farm or Lease Name L. R. KERSHAW
3. Address of Operator P. O. BOX 728, HOBBS, NEW MEXICO 88240			9. Well No. 10
4. Location of Well UNIT LETTER F FEET FROM THE WEST LINE AND 2080 FEET FROM THE NORTH LINE, SECTION 13 TOWNSHIP 20-S RANGE 37- E NMPM.			10. Field and Pool, or Wildcat WEIR TUBB EAST
15. Elevation (Show whether DF, RT, GR, etc.) 3562' (DF)			12. County LEA

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	REPAIR WATER FLOW <input type="checkbox"/>
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	

17. 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. SET UP. PULL PLUG AND PUMP FROM 1462' TO 1400'.
2. GROUT OUT DRINKING ZONE.
3. CUT 10' OF TUBB STRING AND SET 10' CEMENT ON PLUG.
4. PERFORATE TUBB STRING W/ 2-JS @ 1462'.
5. SQUEEZE PERFS @ 1462' W/ 600 SX CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. SQUEEZE W/ADDL. 450 SX CEMENT, 100% DOG.
6. SET CIEP IN DRINKING SECTION @ 1400' AND SPOT 40' CEMENT ON PLUG. TEST CASING TO MONITOR PERFS.
7. TESTED CEMENT TO 800# FOR 30 MINUTES, 1:30-2:00 PM, 12-1-83. TESTED OK.
8. DRILL OUT PLUGS IN BOTH STRINGS.
9. INSTALL PRODUCTION EQUIPMENT. TEST AND RETURN TO PRODUCTION.

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

SIGNED   
TITLE ASST DIST MGR

DATE 12-19-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISORAPPROVED BY  TITLE 

DATE DEC 22 1983

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MATERIALS DEPARTMENT

DATE FORM RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

*WELL*

L CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-79

5a. Indicate Type of Lease

State  Fee

5. State Oil & Gas Lease No.  
B-1080-1

## SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO LIFT UP PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO..." (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL   
OTHER -

Name of Operator

Texaco Inc.

Address (if not above)

P.O. Box 728, Hobbs, NM 88240

Location of Well

UNIT LETTER C

1880

West

330'

FEET FROM THE

LINE AND

FEET FROM

THE North

LINE, SECTION 1

TOWNSHIP 18-S

RANGE 34-E

MAPPL.

15. Elevation (Show whether DE, RT, GR, etc.)

3993' (GR)

12. County

Lea

8. Field and Pool, or Wildcat  
Vacuum Glorieta

7. Unit Agreement Name

N.M. "M" State

9. Well No.

8

10. Field and Pool, or Wildcat

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:PERMITS & TEMPORAL WORK   
TEMPORARILY ABANDON   
FILL OR ALTER CASING PLUG AND ABANDON CHANGE PLANS REMEDIAL WORK COMMENCE DRILLING OPS. CASING TEST AND CEMENT JOB ALTERING CASING PLUG AND ABANDONMENT OTHER Repair water flow & treat 

16. 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. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 5110'. Ran RA Tracer Survey.
3. Cemented 10-3/4" x 7-5/8" csg annulus w/650 sx Class C cement. WOC.
4. Ran temperature survey. Cement from 1800' to surface.
5. Set pkr @ 5887'. Acidize perfs 5962-6092' w/6000 gals 15% NEFE acid in 4-1500 gal stgs separated by 9 ball sealers. Flushed w/25 Bbls KCl water.
6. Install pumping equipment. Test & return to production.

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

Asst. Dist. Superintendent DATE 10-23-80

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

## 'L' CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

NO. OF COPIES RECEIVED	
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FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW FILE

5a. Indicate Type of Lease

State Fee 

5. State Oil &amp; Gas Lease No.

B-1733

## 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- 2. Name of Operator Texaco, Inc. 3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240 4. Location of Well UNIT LETTER <u>B</u> . 770 FEET FROM THE <u>North</u> LINE AND <u>2090</u> FEET FROM THE <u>East</u> LINE, SECTION <u>1</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> MMPLM.	7. Unit Agreement Name --- 8. Farm or Lease Name New Mexico 'L' State 9. Well No. <u>6</u> 10. Field and Pool, or Wildcat Vacuum Glorieta Vacuum Wolfcamp
15. Elevation (Show whether DF, RT, GR, etc.) <u>4005'</u> (DF)	12. County Lea

16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <u>Repair Water Flow</u> <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
--	--	--	---

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

- Rigged up. Pull rods from Glorieta & Wolfcamp. Pull Glorieta tubing.
- Set REP in Glorieta @ 3600' & Wolfcamp @ 4000'. Set Cement retainer in Elinebry @ 6386'.
- Squeeze open Elinebry perfs. 6684'-6697' w/28 sx. Class 'H' Cement.
- Spot Cement plug from 6386'-4000'.
- Spot Cement plug from 3000'-1600'.
- Perforate 2 7/8" Csg w/2-JS @ 1535'. Squeeze w/670 sx. Class 'H' Cement containing 2% CaCl.
- Cement 9 5/8" x 2 7/8" Csg Annulus w/600 sx. class 'H' cement containing 2% CaCl. Follow 2/400 sx. class 'C' Thix-Set cement containing 3% CaCl. WOC. Tested OK.
- Install pumping equipment. Test & return to production.

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

SIGNED J. H. Huff TITLE Asst. Dist. Supt. DATE 12/19/89

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

## Dr. DEPT OF ENERGY AND MINERALS

## DEPARTMENT

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## WATER CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

5a. Indicate Type of Lease

State Fee 

5b. State Oil &amp; Gas Lease No.

E-155

## 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 - 2" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>Texaco, Inc.</b>	8. Form of Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 722, Hobbs, New Mexico 88240</b>	9. Well No. <b>92</b>
4. Location of Well UNIT LETTER <b>M</b> FEET FROM THE <b>South</b> LINE AND <b>660</b> FEET FROM THE <b>West</b> LINE, SECTION <b>36</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, CR, etc.) <b>4001' 4001' (GR)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER <b>Repair Waterflow</b>			

17. 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. Rig up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RSP @ 4000' & dump 20' sand on plug.
3. Test 5 1/2" Csg. Perforate 5 1/2" Csg. w/2-JS @ 1565'. Set cement retainer @ 1500'.
4. Cement 5 1/2" Csg. perfs. @ 1565' w/200sx class 'H' cement. Circulate cement. Squeeze w/addl. 200 sx. class 'H' cement. Run temperature survey if cement does not circulate. VOC. DOC & test.
5. Run production equipment. Test & return to production.

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

SIGNED

TITLE **Asst. Dist. Supt.**DATE **1/16/81**

APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO

SEA

## WEL' LE

Central Vacuum Unit (EXP)	92	1-26-81	5½" @ 4096	RECOMMENDED REMEDIAL WORK: Correct salt wtr flow.	4710
TX WI 36.27108%					
Est. #1-3511					

MIRU Well Units 1-26-81. Pld rds & SSP. Pld 2-7/8" tbg. Ran RBP. Set @ 3906'. Welex pfd 5½" csg 2 holes @ 1565'. Ran cmt rtnr. Set @ 1494'. Halli P/50 BFW thr rtnr. Could not break cir to surf. Halli sqzd pfs w/400 sx Cl H 2% CaCl cmt to 1200#. JC 4 PM 1-26-81. WOC 15 hrs. Welex ran temp surv fr surf to 1485'. Fnd no cmt top. Ran 4-3/4" bit & 10-3½" DC's. Drld cmt rtnr to 1494' & cmt to 1570'. Fnd no flow. Prep to tst 5½" csg.

No. of Days:	Est: 7 Comm: 3	Cash: Est: \$29,300 Comm: \$13,700
<u>1/30-2/2-81</u>		

1-30 Opnd well. No flow. Tstd 5½" csg to 800# for 30 mins 7-7:30 AM 1-29-81. Tst OK. POH w/bit & DC's. RIH w/rtrvg tool Wshd sd off RBP & rec. Ran bit. C/O OH 4690-4710'. POH. LD DC's & bit.

1-31 Ran prod equip. P/12 hrs, 2 BO, 0 BW.

2-1 P/24 hrs, 2 BO, 22 BLW. (-278 BLW).

2-2 P/24 hrs, 4 BO, 22 BLW. (-256 BLW).

No. of Days:	Est: 7 Comm: 5	Cash: Est: \$29,300 Comm: \$18,000
<u>2-3/5-81</u>		

P/24 hrs, 4 BO, 16 BLW. (-200 BLW).

No. of Days:	Est: 7 Comm: 5	Cash: Est: \$29,300 Comm: \$18,000
<u>2-6/12-81</u>		

On 24 hr OPT ending 10 AM 2-9-81. P/120 BO, 150 BSW. GOR-965. Grav 36.8. Prod in 4-3/4" OH 4096-4710". 1-3/4" SSP. 10-144" SPM. Vacuum Grayburg San Andres Fld. Prod before Workover was 86 BOPD. Allow is 120 BOPD.

No. of Days:	Est: 7 Comm: 5	Cash: Est: \$29,300 Comm: \$18,000
--------------	----------------	------------------------------------

FINAL REPORT

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**OIL CONSERVATION DIVISION**  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

6. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fan <input type="checkbox"/>
7. State Fld. & Gun Lease No. <b>B-1306</b>	

**SUNDRY NOTICES AND REPORTS ON WELLS**

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR TO ADD TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

Operator

TEXACO Inc.

Address of Operator

P.O. Box 728, Hobbs, NM 88240

Location of Well

UNIT LETTER H FEET FROM THE 660 LINE AND East 1980 FEET FROM  
THE North LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E MMFM.

15. Elevation (Show & Test, DF, RT, GR, etc.)

3983' (DF)

10. Field and Pool, or Wildcat  
**Vacuum Grayburg-San Andres**

11. County  
**Lea**

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

ALTERING CASING

TEMPORARILY ABANDON

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CHANGE PLANS

CASING TEST AND CEMENT JOB

OTHER

OTHER Repair Water Flow

17. 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. Rig up. Pull rods & pump. Install BOP. Pull tubing. Log well.
2. Set RBP 500' below top of cement & dump 10' sand on plug.
3. Perforate above cement top w/4 JS. Set cement retainer 50' above perfs.
4. Cement w/500 sx. Class "H" cement & squeeze w/200 add'l. sx. WOC. DOC. Test. Run temperature survey if cement does not circulate.
5. Set pkr. @ 4000'. Frac open hole 4102-4675' w/30,000 gal. X-Linked gel, 36,000 20/40 sand & 18,000# 10/20 sand.
6. Install pumping equipment. Test & return to production.

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

Asst. Dist. Supt.

DATE 11-11-80

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Central Vacuum Unit (IDC) TX WI 36.27108%	102	12-30-80	5½" @ 4102	RECOMMENDED REMEDIAL WORK: Shut off waterflow.	4710 4625 PB
MIRU Well Units 12-30-80. Pld rds & tbg. Ran RBP. Set @ 3900'. Spt 25 sx sd. Tst 5½" csg to 800#. OK. RU Welex. Pfd 5½" csg w/2 shots @ 1558'. Had approx 250 BPH wtr flw. Ran cmt rtnr & set @ 1496'. RU Halli. P/50 BJW dn bradenhead. Flwg @ rate of 60 Bbls. P/2 BPM @ 1100#. Cmtd w/550 sx Cl H cmt w/2% CaCl. Cmt cir w/30 sx mix. Clsd bradenhead. Sqzd pfs w/200 sx cmt. JC 4:15 12-31-80. WOC 16 hrs. Opnd bradenhead. Had no flow. Ran 4-3/4" bit & 10-3-1/8" DC's. Drld cmt rtnr & cmt fr 1496-1560'. SION. Tstd 5½" csg for 30 mins 7:30-8 AM on 1-2-81 to 800#. OK. Ran bit to 3900'. Wshd sd off of RBP & rec it. Ran 4-3/4" bit. C/O OH 4630-4675'. Pld & LD DC's. Prep to log.					
No. of Days: Est: 10 Comm: 4 <u>1-6/8-81</u>			Cash: Est: \$75,000 Comm: \$15,000		
CRC ran GR-CNL w/Cal log 4700-3800'. Schlum ran GR-CNL w/Cal log 4685-3800'. Ran prod equip & SN & set @ 4648'. P/16 hrs-no gauge. Pmp trouble.					
No. of Days: Est: 10 Comm: 6 <u>1-9/15-81</u>			Cash: Est: \$75,000 Comm: \$23,000		
1-9 P/24 hrs, 9 BO, 9 BW. 1-12 P/72 hrs, 27 BO, 26 BW. 1-13 P/24 hrs, 14 BO, 5 BW. 1-14 P/24 hrs, 14 BO, 3 BW. 1-15 RU Well Units. Pld pmp & rds & 2-3/8" tbg. Prep to run 3½" frac pipe.					
No. of Days: Est: 10 Comm: 7 <u>1-16/22-81</u>			Cash: Est: \$75,000 Comm: \$24,000		
Ran pkr on 3½" frac pipe. PSA 3990'. Western frac OH 4102-4675' w/30000 gals Minimax II & 54000# 10/20 & 20/40 sd, 1500 gals NEFE acid & 200# BAF & 500# RS. AIR 1st stg 15 BPM @ 2500# w/blk. FM press incr to 3500# @ AIR 11 BPM. Press incr to 4800# when 20/40 sd 3#/gal on FM. Shut pmp down. BF/well & rev sd out of 3½" frac pipe. Pld & LD pkr. Ran Hydrostatic bailer & C/O OH 4230-4233'. Ran 4-3/4" bit. C/O sd 4233-4505'. Cont C/O frac sd.					
No. of Days: Est: 10 Comm: 13 <u>1-23/29-81</u>			Cash: Est: \$75,000 Comm: \$55,275		
Drld & C/O to TD 4695'. POH Ran prod equip. Last 24 hrs, 15 BNO, 38 BLW. -3350 E					
No. of Days: Est: 10 Comm: 15 <u>1/30-2/2-81</u>			Cash: Est: \$75,000 Comm: \$61,075		
1-30 P/24 hrs, 10 BO, 28 BLW. (-3322 BLW). 1-31 P/24 hrs, 9 BO, 21 BLW. (-3301 BLW). 2-1 P/24 hrs, 10 BO, 20 BLW. (-3281 BLW). 2-2 P/24 hrs, 12 BO, 22 BLW. (-3259 BLW).					
No. of Days: Est: 10 Comm: 13 <u>2-3/5-81</u>			Cash: Est: \$75,000 Comm: \$61,075		
P/24 hrs, 15 BO, 14 BLW. (-3299 BLW).					
No. of Days: Est: 10 Comm: 13 <u>2-6/12-81</u>			Cash: Est: \$75,000 Comm: \$61,075		
On 24 hr OPT ending 8 AM <u>2-9-81</u> . P/11 BO, 9 BLW. GOR-446. Grav 36.8. Prod in 4-3 OH 4102-4710'. 1½" SSP. 8-48" SPM. Prod in Vacuum Grayburg San Andres Fld. Prod prior to Workover was 56 BOPD. Allow 11 BOPD.					
No. of Days: Est: 10 Comm: 15			Cash: Est: \$75,000 Comm: \$61,075		

STATE OF NEW MEXICO  
GY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

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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.)

OIL WELL  GAS WELL  OTHER

Water Injection

5a. Indicate Type of Lease

State

Fee

5b. State Oil & Gas Lease No.

B-1080-1

7. Unit Agreement Name

Vacuum Grayburg San Andres Unit

8. Form or Lease Name

TEXACO Inc.

9. Well No.

33

10. Field and Pool, or Kidney  
Vacuum Grayburg San Andres

1. Name of Operator	2. Address of Operator	3. Location of Well	4. Bit Letter	5. Depth	6. Line, Section, Township, Range	7. Elevation (Show whether DF, RT, GR, etc.)	8. County
TEXACO Inc.	P.O. Box 728, Hobbs, N.M. 88240		E	2630 FEET FROM THE North	LINE AND 1310 FEET FROM	3993' (GR)	Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

1. DEMEDIAL WORK	<input type="checkbox"/>	2. PLUG AND ABANDON	<input type="checkbox"/>	3. REMEDIAL WORK	<input type="checkbox"/>	4. ALTERING CASING	<input type="checkbox"/>
5. PERMITS ABANDON	<input type="checkbox"/>	6. CHANGE PLANS	<input type="checkbox"/>	7. COMMENCE DRILLING OPS.	<input type="checkbox"/>	8. PLUG AND ABANDONMENT	<input type="checkbox"/>
OR ALTER CASING	<input type="checkbox"/>			9. CASING TEST AND CEMENT JOB	<input type="checkbox"/>		
				10. OTHER <u>Repaired casing leak</u>	<input checked="" type="checkbox"/>		

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. Rigged up. Pulled pkr. Installed BOP.
2. Set RBP at 4241', spot with 2 sx. SD.
3. Cemented leak w/200 sx. class "C" with 2% CACL - FR 285-380'.
4. Cemented casing leak w/100 sx. class "H" w/2% CACL and 1/4# FC/sx.
5. Squeezed casing leak with 150 sx. class "C" with 15% gel and 75 sx. 50-50 Calseal.
6. Cemented leak w/150 sx. class "C" w/15% gel and 75 sx. 50-50 Calseal.
7. Cemented well w/1500 gal. Flo-chek in 3 stages (500 gal/stage) and 100 sx. class "C" 50-50 Calseal.
8. Circ. hole w/10# brine. Cemented csg. leak at 360' w/100 sx. class "C" thick set cement in 2 stages w/500 gal. Flo-check prior to 1st stage and 100 gal. between stages.
9. Ran in hole w/injection pkr and tbg.
10. Loaded annulus w/inhibited water and return to injection.

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

W.B. Ller

TITLE Dist. Opr. Mgr.

DATE 5 /14/85

## ENERGY AND MINERALS DEPARTMENT

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OPERATOR	

## CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

## 3a. Indicate Type of Lease

State Fee S. State Oil & Gas Lease No.  
F-1565

## SUNDY 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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)OIL WELL GAS WELL 

OTHER

## 7. Unit Agreement Name

Name of Operator  
Getty Oil Company8. Farm or Lease Name  
State "BA"

## Address of Operator

P.O. Box 728, Hobbs, N.M. 88240

## 9. Well No.

9

## Location of Well

UNIT LETTER B, FEET FROM THE 660 LINE AND North FEET FROM

10. Field and Pool, or Wilcox

THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NWPM.

Vacuum Glorieta

## 11. Elevation (Show whether DF, RT, CR, etc.)

4005' (DF)

## 12. County

Lea

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK PLUG AND ABANDON ALTERING CASING TEMPORARILY ABANDON REMEDIAL WORK PLUG AND ABANDONMENT ULL OR ALTER CASING CHANGE PLANS COMMENCE DRILLING OPS. 

OTHER

CASING TEST AND CEMENT JOB OTHER Abandoned Blinebry - completed as single in Glorieta, squeeze old San Andres perfs. 

. 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. Rigged up. Pulled rods and pump.
2. Set CIBP at 6360' and dumped 30' cmt. on plug. Abandoned Blinebry perfs.
3. Squeeze csg. leak in San andres (west string) and San Andres perfs in East string w/100 sxs. class "H" cmt. on East string. Displace cmt. in East string w/24 BW . Displace cmt. in West string w/21 1/2 BW. WOC. DOC.
4. Test for 30 minutes to 600#, 9:00-9:30 AM. 3/22/85. Tested OK.
5. Spotted 125 gal. 20% NEFE over perfs 6016-6186' (Glorieta Perfs) plugged San Andres 5913'.
6. Acidized perfs w/2875 gal. 20% NEFE in 3 stages w/50# RS BLK between stages.
7. Installed pumping equipment in East string and place on production.

WELL IS NOW A SINGLE PRODUCER FROM THE VACUUM GLORIETA.

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

W. B. Lehr

TITLE District Operations Manager

DATE April 15, 1985

MADE BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

POSITIONS OF APPROVAL, IF ANY:

WELL FILE

PERSONAL AND CONFIDENTIAL

Form PO-32

DAILY DRILLING REPORT

Page 27

Hobbs District-Midland Division

As of 7 A.M. NOVEMBER 27, 1985

LEA

SKELLY UNIT WELL NO. 11 (WI 100%) 91.06<sup>4</sup>  
(EXP)

TD: 3590'

CSG: DN HLE COMMINGLE

RW: C/O & A/

W/O COMMENCED: 11-5-85

EST NO: 5-3791, EST DAYS: 4, COMM - 5

EST CASH: \$15,000, COMMITTED: \$17,322

11-6/26-85

ON 24 HR PT ENDING 11-26-85. P/36 BO, 259 BW. GOR-N/A, GRAV-32.  
13X74" SPM. 2"X1-1/2"X15' PMP. PROD FR FREN 7 RIVERS GRAYBURG  
JACKSON PRFS 2217-3493'. PROD PRIOR TO W/O: 24 OIL, 98 WTR. CHANGE  
STATUS FR W/O TO PMPG EFFECTIVE 11-26-85. FINAL REPORT

# OPERATOR'S COPY

Form 9-331  
Dec. 1973

Form Approved.  
Budget Bureau No. 42-R1424

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

## SUNDY 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 Form 9-331-C for such proposals.)

1.	oil well <input checked="" type="checkbox"/>	gas well <input type="checkbox"/>	other		
2.	NAME OF OPERATOR Getty Oil Company				
3.	ADDRESS OF OPERATOR P.O. Box 728, Hobbs, New Mexico 88240				
4.	LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: Unit Ltr. I, 1980 FSL & 660 FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:				
16.	CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	<input checked="" type="checkbox"/>		<input type="checkbox"/>		
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>		
SHOOT OR ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>		
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>		
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>		
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>		
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>		
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>		
(other)	<input type="checkbox"/>		<input type="checkbox"/>		
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.)*				
1.	Rig up. Pull rods & tbg.				
2.	Set 8 5/8" RBP at + 2100' & test. Dump 15' of sand on RBP.				
3.	Log well to determine water flow.				
4.	Perforate 4 squeeze holes (depth to be determined on location).				
5.	Set cement retainer 50' above squeeze perfs.				
6.	Circ. cement to surface w/ 400 sxs staging in the last 5 bbls of cement. WOC. DOC. Test.				
7.	Pump 10 bbls of fresh water w/ 25 gals of surflo-S41 to wash formation face.				
8.	Follow w/ 445 gals of 50/50 mixture of 220 gals of surflo-H392 and 220 gals of fresh water w/ 5 gals of surflo-S32.				
9.	Acidize w/ 6000 gals HCL NEFE (3 stages), and divert w/ two 250# blocks of rock salt in gelled brine.				
10.	Squeeze 110 gals of surflo-H35 mixed w/ 20 bbls fresh water into the formation. Over-Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.				
18.	I hereby certify that the foregoing is true and correct				
SIGNED	<u>W. B. Ulmer</u>				TITLE _____ DATE _____
(This space for Federal or State office use)					
APPROVED BY	<u>Charles J. Doherty</u>				TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:					

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State offices.

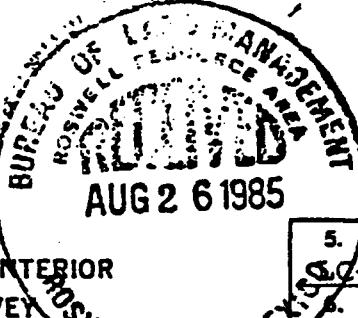
**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices.**

In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

11. flush w/ 200 bbls of water.  
Run production equipment and place on production.  
Downhole Commingled

## OPERATOR'S COPY

Form 9-331  
Dec. 1973Form Approved.  
Budget Bureau No. 42-R1424UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## 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 Form 9-331-C for such proposals.)

1. oil well  gas well  other Injection well2. NAME OF OPERATOR  
Texaco Producing Inc.3. ADDRESS OF OPERATOR  
P.O. Box 728, Hobbs, N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: Unit Ltr J, 1980 FSL &amp; 1980

AT TOP PROD. INTERVAL: FEL

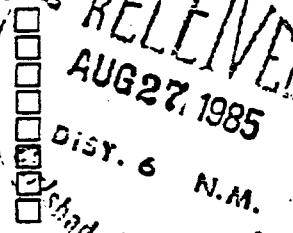
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other) Repair csg. leak 

SUBSEQUENT REPORT OF:



(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

1. Backflow well to pit.
2. MIRU pulling unit. Install BOP.
3. Pull 2 3/8" tubing and 8 5/8" AD-1 packer.
4. RIH w/8 5/8" pkr and RBP on 2 7/8" tbg. Set RBP @ + 2100'. Dump 15' or sand on top of RBP.
5. Load hole w/water, and locate hole(s) in 8 5/8" casing.
6. Establish injection rate w/brine through hole in casing. Two squeeze perfs at point of leak may be required if unable to establish rate.
  - (a) If able to circulate out 10 3/4" - 8 5/8" casing annulus, run a dye fluid caliper to estimate annular volume. Calculate cement volume w/100% excess.
  - (b) If not able to circulate, run 500 sx Light cmt. tailing in w/150 sx class "H" cmt w/2% CaCl<sub>2</sub>. (Tag w/RA material).

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ CONTINUED ON OTHER SIDE  
Set @ \_\_\_\_\_ ft.

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

SIGNED W. B. Under TITLE Dist. Opr. Mar. DATE 8/22/85

APPROVED BY Robert L. Baker This space for Federal or State office use  
 CONDITIONS OF APPROVAL, IF ANY: APR 1985  
 Subject to CORLENE F. BURTON, RBP DATE 9-23-85  
 Like Approval  
 by State

~~WELL #~~

PERSONAL AND CONFIDENTIAL

Form PO-32

DAILY DRILLING REPORT

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Page 18

Hobbs District-Midland Division

---

As of 7 A.M. DECEMBER 4, 1985

---

WORKOVERS - EXP

---

EDDY

---

SKELLY UNIT WELL NO. 12 (WI 100%) .91674  
(EXP)  
TD: 2235'  
CSG: 8-5/8" SET @ 2130'  
RW: C/O, Repair Csg.  
W/O COMMENCED: 10-3-85  
EST NO: 5-3881, EST DAYS: 7, COMM - 7  
EST CASH: \$32,300, COMMITTED: \$18,300

10-3-85/11-27-85

---

ON 24 HR INJ ENDING 11-27-85. INJ'G 153 BWPD @ 800#. LOVINGTON SUB AREA O.H. FR 2130-2235'. INJ PRIOR TO W/O: SI DUE TO FAILURE OF CSG INTEGRITY TEST. FINAL REPORT

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## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

**Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.**

**Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices.**  
In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method or parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

8. Pull packer and:
  - (a) If the well circ. @ 4 BPM or more and less than 1000 psi and if the hole is @ less than 750', then rig up to squeeze without a pkr down the csg.
  - (b) Otherwise, set 8 5/8" cmt ret. 50' above hole and squeeze through 2 7/8" tbg. If tbg and retainer are in the hole, pressure up on the 8 5/8" csg to prevent collapsing csg Pump cmt. until cmt. circulates to surface. Close the bradenhead valve and squeeze cmt into formation. Tag cmt w/RA sand (iridium 84 day half-life).
9. If tbg and retainer are in the hole, pressure up on the 8 5/8" csg to prevent collapsing csg Pump cmt. until cmt. circulates to surface. Close the bradenhead valve and squeeze cmt into formation. Tag cmt w/RA sand (iridium 84 day half-life).
10. Close the bradenhead valve and squeeze cmt into formation. Tag cmt w/RA sand (iridium 84 day half-life).
11. Displace to cmt retainer or 50' above hole. If tbg is in the hole, sting out of retainer, circ. hole clean, and pull tbg. Shut-in well for 24 hrs.
12. Drill out cmt and retainer. Test squeeze hole holes to 750 psi.
13. Circulate sand off RBP and pull RBP. Clean out to TD (2235').
14. Run injection tbg and pkr. Circulate pkr. fluid. Set pkr. @ + 2000'.
15. Rig down pulling unit.
16. Install wellhead equipment, and place on injection
17. After well stabilizes, run injection profile. Locate top and bottom of squeeze cmt with gamma ray.

OPEN MYER'S COTT  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other Dual water injection

2. NAME OF OPERATOR  
GETTY OIL COMPANY

3. ADDRESS OF OPERATOR  
P.O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: Unit Ltr. N, 650 FSL & 2087' FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Repaired csg. leaks		

5. LEASE

LC-029420 (A)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Skelly Unit

9. WELL NO. 30

10. FIELD OR WILDCAT NAME  
Fren 7-Rivers & Grayburg Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR  
AREA  
Sec. 15, T-17S, R-31E

12. COUNTY OR PARISH | 13. STATE  
Eddy | NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3870' DF

(NOTE: Report results of multiple completion or zone  
change on Form 9-330.)

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.)\*

1. Rigged up and pulled tbg. and pkr.
2. Tested for leaks w/pkr.
3. Set BP at 2184' and pkr at 2481', cemented csg. leaks from 1553-1587'  
w/100 sx. CL "H" neat. WOC. DOC.
4. Test for 30 minutes to 600#, 6:30-7:00 A.M., 1/23/85. Tested OK.
5. Ran 2 1/16" Inj. tbg. and set pkr. at 3110'. Loaded annulus w/inhibited  
water.
6. Return to injection 1/11/85.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED W.B. Lehr TITLE District Opr. Mgr. DATE March 8, 1985

(This space for Federal or State office use)

APPROVED BY ASSISTANT FOR RECORDS TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:  
*See Q*

MAR 18 1985

\*See Instructions on Reverse Side

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

*WELL FILE*

1. Indicate Type of Lease	
State <input type="checkbox"/>	Federal <input checked="" type="checkbox"/>
2. State Cl. & C-20 Lease No.	

## SUNDAY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE THE SPECIFICATION FOR DRILLING OR REOPENING C-101 FOR SUCH PROPOSALS.

3. Gas Well <input type="checkbox"/>	Water Injection Well	7. Unit Agreement Name Skelly Penrose A Unit
4. Operator exaco Producing Inc.		8. Farm or Lease Name
5. P.O. Box 728, HOBBS, N.M. 88240		9. Well No. 52
6. DEED Elevation FEET 1980 LINE, SECTION 10 TOWNSHIP 23S RANGE 37E DEPT. LINE AND FEET FROM THE NORTH 660 DEPT. LINE, SECTION TOWNSHIP RANGE ELEVATION		10. Field and Fees, or Wildcat Langlie Mattix
11. Elevation (Show whether DF, RT, GR, etc.) 3294' DF		12. County Lea

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

13. METAL HOME <input type="checkbox"/>	14. PLUG AND ABANDON <input type="checkbox"/>	15. REMEDIAL WORK <input type="checkbox"/>	16. ALTERING CASING <input type="checkbox"/>
17. ST ABANDON <input type="checkbox"/>	18. CHANGE PLANS <input type="checkbox"/>	19. COMMERCIAL DRILLING OPS. <input type="checkbox"/>	20. PLUG AND ABANDONMENT <input type="checkbox"/>
21. TEE CASING <input type="checkbox"/>	22. Casing TEST AND CEMENT JOB <input type="checkbox"/>	23. OTHER <u>Repaired Bradenhead Waterflow</u> <input checked="" type="checkbox"/>	

\* Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operation.)

1. Rigged up. TOH w/injection equipment.
2. TIH w/7" CIBP set at 3200'. Dump 40' cmt. on top.
3. P/250 sx cl "H" w/2% CaCl. Perfed at 1075'.
4. GIH w/7" cmt Ret and set at 1000'.
5. P/250 sx cl "H", 5# GIL, 10# Floseal, 1/4# FC, 6 1/2# ST and 3# SD.
6. Ran temp. survey.
7. Drilled ret and cmt 1000-1075'. Ran CBL 1200-100'.
8. DOC and CIBP at 3300'. Circ. clean from 3608-98'.
9. TIH w/injection equipment and pkr. to 3310'. Loaded annulus w/inhibited wtr. and return to injection.

## OIL CONSERVATION COMMISSION

P. O. BOX 2028

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-72

STATE	
TYPE	
REG. NO.	
AMC OFFICE	
PERMIT NO.	

3a. Interest Type of Lease
State <input type="checkbox"/>
Frac <input checked="" type="checkbox"/>
3. State Oil & Gas Lease No.

## SUMMARY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR REPORTS TO OIL &amp; GAS LEASES OR FOR PLUG SITES TO A DIFFERENT OPERATOR.)

LL  Gas  Well  Other

Oil Operator

Texaco Producing Inc.

Gas Operator

P. O. Box 728 Hobbs, New Mexico 88240

LINE OF WELL

LINE LETTER M LINE NUMBER 1310 FEET FROM THE South LINE ANG 1310 FEET FROM  
TOWNSHIP 23S RANGE 37E SECTION 37. Unit Agreement Name  
**Skelly Penrose A Unit**  
8. Firm or Lessee Name

9. Well No.

10. Field and Pool, or Wildcat  
**Langlie Mattix**15. Elevation (Show whether DF, RT, GR, etc.)  
**3306' DF**12. County  
**Lea**

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

REMEDIAL WORK   
FACILITY ABANDON   
ALTER CASING PLUG AND ABANDON   
CHANGE PLATE   
REMEDIAL WORK   
COMMERCIAL DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER ALTERING CASING   
PLUG AND ABANDONMENT   
Repair bradenhead water flow 

Procedure or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed.) SEE RULE 1103.

- 10-25-85 MIRU PU. TOH with production equipment.
- 10-28-85 Set CIBP at 3295'. Perforate 5½" casing at 425'.
- 10-29-85 Ran and set retainer at 319'. Cemented perfs at 425' with 150 sks.
- 10-30-85 Drilled out retainer and cement. Fell free. Would not hold pressure.
- 10-31-85 Recemented with 300 sks. No squeeze.
- 11-01-85 Cement with 250 sacks.
- 11-04-85 Drilled out retainer and cement. Would not hold pressure.
- 11-06-85 Cement perfs with 500 sacks. No squeeze.
- 11-07-85 Cement with 150 sacks.

See reverse side.

*W. B. Liden*

Dist. Opr. Mgr.

12-15-85

DEPARTMENT OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF EDITION RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

L CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease  
 State  Fee   
 5. State Oil & Gas Lease No.  
 B-155-1

## SUNDAY 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name N.M. 'O' St. NCT-1
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 17
4. Location of Well UNIT LETTER N FEET FROM THE South LINE AND 2080 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NE/4	10. Field and Pool, or Wildcat Vacuum (Wolfcamp)
15. Elevation (Show whether DF, RT, GR, etc.) 4008' (DF)	12. County Lea

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	REPAIR WATERFLOW <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER <input type="checkbox"/>			

17. 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. Rig up. Install BOP. Set RBP in Shut-In Penn String @ 10,000'. Set RBP in Wolfcamp Zone @ 9000'. Set CIBP in collapsed 2 7/8" abandoned Penn String @ 9850' & spot 20' Cement on plug.
2. Perf. abandoned Penn String w/2-Holes through 2 7/8" & 9 5/8" Csg 1640'.
3. Cement to surface 2 7/8" Csg Perfs @ 1640' w/600 Sx. Class 'H' Cement up 16" x 11 3/4" Csg. Annulus. Squeeze w/addl. 200 Sx. Class 'H' Cement. WOC. DOC & Test.
4. Pull RBP's @ 10,000' & 9000' in other zones. Return to production.

THE COMMISSION MUST BE NOTIFIED  
24 HOURS PRIOR TO COMMENCING WORK

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

*J.L.H.*

TITLE Asst. Dist. Mgr.

DATE 3-10-81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

*# 35' cut*

N M. "O" St. (NCT-1) (EXP) TX WI 100% Est. #1-3555	17	5-18-81	(x) 2-7/8" @ 10975 (y) 2-7/8" @ 10964 (z) 3½" @ 12082	RECOMMENDED MEDIAL WORK: Correct sa cer flow.	(x) 12082 (y) 12082 NL 9858 PB (z) 12082 11880 PB
				WELL	
(x) Pennsylvanian 10130-10140 (TRO) (z) Wolfcamp 9962-10029 (Prod)				(y) Pennsylvanian 10130-10140 (ASP) 2 7/8"	
3½"					
MIRU Well Units Inc. 5-18-81. POH w/2-1/16" tbq. WIH w/3½" RBP on 2-1/16" tbq set @ 4000' in Wlfcmp(z) strng. POH. WIH w/2-7/8" RBP on 1-5/8" DP. Set RBP @ 4016' in Penn strng. POH. McCull ran 2.225 gauge ring. Ring std @ 6742'. POH WIH w/2-7/8" RBP on 1-5/8" DP. RBP set @ 4016' in Penn strng. SION. Prep to tsi plug & spt sd.					
No. of Days: Est: 6 Comm: 3			Cash: Est: \$33,500 Comm: \$8,500		
<u>5-22/28-81</u>					
Tstd RBP. POH. Dmpd 20' sd on RBP. McCull WIH w/oriented pfg gun & pfd 2 JSPI @ 1640'. Could not estab an inj rate. McCull pfd 2-7/8" (y)strng & 2-7/8" (x)str On 2nd run pfd 2-7/8" & 8-5/8" csg @ 1640'. P/l/8 BPM into FM @ 2000#. Halli cmtd triple comp ann w/2-7/8", 3½" & 9-5/8" csg w/500 sx Cl H cmt w/2% CaCl. C cir. Clsd vlve & sqzd out 9-5/8" csg 200 sx Cl C w/3% CaCl Thixset. Disp 2-7/ (y)strng to 1480'. JC 4 PM 5-26-81. WOC 14 hrs. WIH w/2-5/16" blade bit on 1-5 DP. Drld cmt 1480-1650'.					
No. of Days: Est: 6 Comm: 7			Cash: Est: \$33,500 Comm: \$30,500		
<u>5/29-6/1-81</u>					
5-29 Tstd 2-7/8" (y)strng to 600# 8:45-9:15 AM 5-28-81. WIH w/1-5/8" DP opn-en to 1670'. RU Halli. Spt 250 gals 15% acid.. POH w/1-5/8" DP. Estab rate of 3 B @ 2000#.					
6-1 Halli cmtd 9-5/8" ann w/500 sx Cl H w/2% CaCl & 200 sx Cl C w/3% CaCl. Thix Disp 2-7/8" (y)strng to 1480'. JC 1:30 PM 5-29-81. WOC 64½ hrs.					
No. of Days: Est: 6 Comm: 9			Cash: Est: \$33,500 Comm: \$44,500		

6-2/4-81

6-2 DOC 1480-1640'. Tstd csg to 600# @ 10:30 AM. Did not hold. Had slight wtr flow. Halli cmtd w/20 Bbls flocek & 150 sx Thixset w/3% CaCl. Displ it. WOC 16 hrs.

6-3 DOC. Tstd csg to 700# 11-11:30 AM 6-2-81. OK. POH w/1-5/8" bit. WIH w/rtrvg tool on 1-5/8" DP. Cir sd off RBP. POH w/2-7/8" RBP. WIH w/2-5/16" blade bit on 1-5/8" DP in 2-7/8" (x) strng.

6-4 DO (x) strng 1550-1650'. Tstd csg to 600# 8:30-9 AM 6-3-81. Held OK. POH.w/ bit. WIH w/rtrvg hd on 1-5/8" DP. Cir sd. POH w/RBP. WIH w/rtrvg hd in (z) strng Cir sd. POH w/3 $\frac{1}{2}$ " RBP. SION. Prep to run prod tbg.

No. of Days: Est: 6 Comm: 12 Cash: Est: \$33,500 Comm: \$63,750  
6-5/11-81

WIH w/1-1/2" tbg & prod equip. Gas lift 154 hrs, 6 BNO, no wtr.

No. of Days: Est: 6 Comm: 13 Cash: Est: \$33,500 Comm: \$64,750

6-12/18-81

GL 24 hrs, 1 BNO, 0 BSW. On OPT.

No. of Days: Est: 6 Comm: 13 Cash: Est: \$33,500 Comm: \$64,750

6-19/25-81

On 24 hr PT ending 8:30 AM 6-19-81. GL 1 BNO, 0 BSW. GOR-72,000. Grav 37.1.

Prod in Wlcmp pfs 9960-10,029'. Prod by Gas Lift. Prod before Workover was 1 BOPD. Allow 1 BOPD.

No. of Days: Est: 6 Comm: 13 Cash: Est: \$33,500 Comm: \$65,420

FINAL REPORT

## CIVIL AND MINERALS DEPARTMENT

S. or Entity Received	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-73

5a. Indicate Type of Lease

State Fno 

5. State Oil &amp; Gas Lease No.

B-1306

## SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" OR FORM C-1011 FOR SUCH PROPOSALS.OIL WELL  GAS WELL 

OTHER

Name of Operator

TEXACO Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER G 1980

FEET FROM THE

North

LINE AND

1980

FEET FROM

THE East LINE, SECTION 6

TOWNSHIP

18-S

RANGE

35-E

NMPN

15. Elevation (Show whether DF, RT, GR, etc.)

3961' (GR)

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPS. PLUG AND ABANDONMENT FULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER OTHER Repair water flow and treat 

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rig up. Pull rods and pump. Install BOP. Pull tubing.
2. Log well.
3. Perforate 5-1/2" casing at base of salt or top of cement, whichever is higher.
4. Set RBP at approximately 2150' and dump 10 sx. cement on plug. Set cement retainer approximately 50 feet above perfs.
5. Cement with 450 sx. Class "C" cement. Attempt to circulate. Squeeze with 250 sx. Class "C" cement. WOC. DOC and test. Pull RBP.
6. Clean out to T.D. (4710'). Set packer at approximately 4000'. Acidize open hole 4070-4710' with 10,000 gals. 20% NE-FE HCl acid in 4 stages using rock salt between stages. Flush with 25 barrels fresh water.
7. Install pumping equipment. Test and return to production.

THE COMMISSION MUST BE NOTIFIED  
24 HOURS PRIOR TO COMMENCING WORK

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

*W.H. Felt*

TITLE Ass't. Dist. Supt.

DATE Oct. 10, 198

APPROVED BY \_\_\_\_\_

FILE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO

LEA

W FILE

Central Vacuum 103 10-30-80 5½" @ 4070 RECOMMENDED REMEDIAL WORK: 4710  
 Unit (IDC) Shut off waterflow.  
 TX WI 36.27108%  
 Est. #4208

MIRU Well Units 10-30-80. Pld rds. Instld BOP. Pld tbg. Ran RBP. Set @ 3900'. Sptd sd over RBP @ 3900'. Pld tbg. RU Welex. Ran CBL fr 3700-1490'. Fnd top of cmt @ 3200'. Fnd some bond around 2000'.

No. of Days: Est: 10 Comm: 2 Cash: Est: \$54,000 Comm: \$15,300  
11-2/6-80

Pfd 5½" csg @ 1569'. Had 150 BPH SW flow. Ran cmt rtnr & set @ 1466'. Halli cmtd thru pfs @ 1569' w/600 sx Cl C cmt w/2% CaCl. P/400 sx & closed bradenhead valve. Sqzd 200 sx dwn. Dmt did not cir. WOC 18 hrs. Ran temp log. Top of cmt @ 400'. Opnd bradenhead. No flow. Ran 4-3/4" & drld cmt rtnr @ 1466' & hard cmt to 1575'. Tstd 5½" csg to 750# 2:10-2:40 PM 11-4-80. OK. Ran bit to 3900' & washed sd off RBP. POH. Trpd in & pld RBP. RIH w/4-34/" bit. C/O OH fr 4560'-4612'.

No. of Days: Est: 10 Comm: 7 Cash: Est: \$54,000 Comm: \$21,000  
11-7/13-80

Drld & C/O to TD 4710'. POH. Spt 2 drums SP-221 across OH 4070-4710'. Ran pkr on 2-7/8" tbg w/2-3/8" tail. Spt acid across OH. PSA 3425'. Western A/C 4070-4710' w/10000 gals 20% NEFE HCl in 4 stgs w/total 3800# RS btwn stgs. Max P-2500#. Min P-700#. AIR 6.7 BPM. ISIP 800#. Vac 1 min. Could not rel'se pkr. Ran FP. Tbg free to top of pkr @ 3425'. Cut tbg @ 3415'. POH. Ran 4½" shoe & 30' x 4½" pipe. Washed 3' sd off pkr. POH. Ran OS. Caught fish & rel'sd pkr. POH. Ran prod tbg. S/5 hrs, 78 BLW. Ran rds U pmp. P/14 hrs-no gauge. Well did not pmp. Lowered rds. Tag'd pmp. Ld tbg. Could not get tb:pmp. Prep to chge pmp.

No. of Days: Est: 10 Comm: 14 Cash: Est: \$54,000 Comm: \$21,000  
11-14/20-80

Chgd pmp. Fnd hole in tbg.. Chgd out 1 jt tbg. P/24 hrs, no prod. RU Clarke WS 11-18-80. Pld rds & pmp. S/6 hrs, 16 BNO, 10 BLW. SION. S/2 hrs, 20 BNO, 3 BLW. Attempted to lower tbg. Had 156' fill. Instld BOP. Pld tbg. Ran sd pmp. Could not C/O. Prep to run 4-3/4" bit.

No. of Days: Est: 10 Comm: 16 Cash: Est: \$54,000 Comm: \$47,200  
11-21/26-80

RU rev unit. WIH w/4-3/4" bit on 2-7/8" tbg. Hit bridge @ 4550'. Drld bridge & C/O to 4710' TD. RD rev unit. Ran prod equip. P/60 hrs, 113 BLW, 20 BNO. Well dwn-elec power off. P/14 hrs, 90 BLW, 8 BNO.

No. of Days: Est: 10 Comm: 17 Cash: Est: \$54,000 Comm: \$49,200

<u>11/27-12/1-80</u>	P/96 hrs, 355 BNO, 500 BLW. (-184 BLW).	Cash: Est: \$54,000 Comm: \$49,200
No. of Days:	Est: 10 Comm: 17	
<u>12-2/4-80</u>	P/24 hrs, 88 BNO, 98 BSW.	
No. of Days:	Est: 10 Comm: 17	Cash: Est: \$54,000 Comm: \$49,200
<u>12-5/11-80</u>	P/24 hrs, 85 BNO, 54 BSW.	
No. of Days:	Est: 10 Comm: 17	Cash: Est: \$54,000 Comm: \$49,200
<u>12-12/18-80</u>	Sqzd 3 drums of scale inhib & 25 BFW. Flushed w/225 BFW. SI 24 hrs. Last 24 hrs P/100 BNO, 4 BLW, 51 BSW.	
No. of Days:	Est: 10 Comm: 17	Cash: Est: \$54,000 Comm: \$49,200
<u>12-19/24-80</u>	On 24 hr OPT ending 9 AM <u>12-19-80</u> P/101 BO, 45 BW. GOR-1385. Grav 36.8. Prod fr Vacuum Grayburg San Andres OH 4070-4710' 2" SSP. 11-48" SPM. Prod before Workover 56 BOPD. Allowable 101 BOPD. <u>FINAL REPORT</u> .	
No. of Days:	Est: 10 Comm: 17	Cash: Est: \$54,000 Comm: \$49,900

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

DATE OF REPORT RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

VIGILANT FILE

OL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

3a. Indicate Type of Lease

State

Fee

3. State Oil & Gas Lease No.

B-155

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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: _____	7. Unit Agreement Name _____
2. Name of Operator TEXACO Inc.	8. Form of Lease Name N.M. 'O' St. NCT-1
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 23
4. Location of well UNIT LETTER <u>O</u> FEET FROM THE <u>South</u> LINE AND <u>1900</u> FEET FROM THE <u>East</u> LINE, SECTION <u>36</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> NMPLM.	10. Field and Pool, or Wildcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) <u>3990'</u> (GR)	12. County Lea

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Repair Water Flow <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

- Rigged up. Pull rods & pump from Glorieta string. Install BOP. Pull tubing.
- Set RBP in Blinbry string @ 4000' & test csg. Tested OK.
- Set RBP in Glorieta string @ 4000' & test csg. Tested OK. Spot 20' on both plugs.
- Perforate 2 7/8" Glorieta string & 8 5/8" csg w/2-shots @ 1545'.
- Cement 11 3/4" x 8 5/8" csg annulus w/400 Sx. Class 'H' cement & 100 Sx. Class 'H' cement containing 2% CaCl. Cement circulated. Squeeze w/add'l 200 Sx. Class 'H' cement containing 2% CaCl. WOC. DOC. Test. Tested OK. Pull RBPs.
- Install pumping equipment. Test & place on production. Compl. 6-22-81

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

SIGNED

TITLE Asst. Dist. Mgr. DATE 6-25-81

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.WELL FILE  
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.)1. OIL WELL  GAS WELL  OTHER 

2. NAME OF OPERATOR

TEXACO INC.

3. ADDRESS OF OPERATOR

P. O. BOX 728, HOBBS, NEW MEXICO

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)At surface 1980' FSL & 660' FEL OF SECTION 26,  
T-24-S, R-37-E, UNIT LETTER "I",  
LEA COUNTY, NEW MEXICO

14. PERMIT NO.

REGULAR

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3178' (DF)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C.C. FRISTOE B NCT-2

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

LANGLIE MATTIX SEVEN RIV

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

SEC. 26, T-24-S, R-37-E

12. COUNTY OR PARISH

LEA

13. STATE

NEW MEXICO

16.

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)

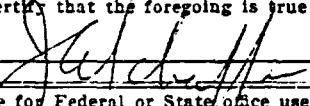
- REPAIRING WELL
- ALTERING CASING
- ABANDONMENT\*

(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.)

1. RIGGED UP. PULLED RODS & PUMP. INSTALL BOP. PULL TUBING.
2. SET RBP @ 3150'. TEST RBP & CSG TO 400#. TESTED O.K. SPOT 12' SAND ON PLUG.
3. LOG WELL. TOC @ 2020'.
4. PERFORATE 7" CSG W/2-JS @ 2015'. SET CEMENT RETAINER @ 1941'.
5. SQUEEZE PERFORATIONS @ 2015' W/750 SX CLASS "C" CEMENT CONTAINING 10# SALT/SX. WOC.
6. DRILL OUT CEMENT. TEST CSG W/1000# FOR 1 HR. TESTED O.K. JOB COMPLETE 3:15 P.M., 10/1/77. PULL RBP.
7. INSTALL PUMPING EQUIPMENT ON 24 HR. POTENTIAL TEST ENDING 9:45 A.M., 10/11/77, WELL PUMPED 1 BBL OIL, 27 BBL WATER, GOR TSTM.
8. RETURN WELL TO PRODUCTION.

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

SIGNED 

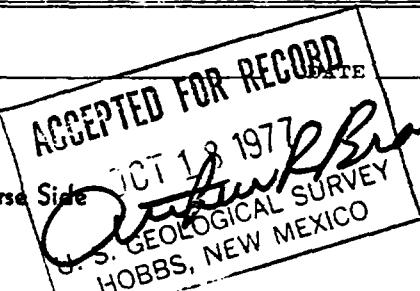
TITLE ASSISTANT DISTRICT SUPT DATE 10/13/77

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

TITLE \_\_\_\_\_

\*See Instructions on Reverse Side



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
OPERATOR	

WELL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease

State

Fee

3b. State Oil & Gas Lease No.

B-155-1

**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 - I" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name ---
2. Name of Operator <b>Texaco Inc.</b>	8. Farm or Lease Name <b>N. M. 'O' St. NCT-1</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>22</b>
4. Location of Well UNIT LETTER <b>M</b> , FEET FROM THE <b>South</b> LINE AND <b>560</b> FEET FROM THE <b>West</b> LINE, SECTION <b>36</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> NWPM.	10. Field and Pool, or Wildcat <b>Vacuum Glorieta</b>
15. Elevation (Show whether DF, RT, GR, etc.,) <b>4010' (DF)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Repair Water Flow <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	X

17. 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. Rigged up. Pull tubing & gas lift equipment.
2. Set RBP in Glorieta string @ 3457'. Perforate 2 7/8" Blinebry string w/2-JS @ 1575'.
3. Cement perfs. @ 1575' w/1000 sx. class 'H' cement containing 2% CaCl. WOC. DOC. & Test. Tested OK.
4. Install pumping equipment. Test & return to production.

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

SIGNED

TITLE Asst. Dist. Mgr.

DATE 5/6/81

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-101  
Revised 10-1-78

No. or Lease Number	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease

State

Fee

3. State Oil & Gas Lease No.

B-155-1

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-  2. Name of Operator Texaco, Inc. 3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240 4. Location of Well UNIT LETTER H FEET FROM THE East LINE AND 1980 FEET FROM THE North LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMPM.	7. Unit Agreement Name -- 8. Farm or Lease Name N. M. '0' St. NCT-1 9. Well No. 16 10. Field and Pool, or Wildcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 4002' (DF)	12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB

OTHER Repair Water Flow

OTHER

17. 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. Rig up. Pull rods & pump from Glorieta string. Install BOP. Pull tubing.
2. Set RBP in Glorieta string @ 5000'. Load string w/2% KC1 water.
3. Set RBP @ 5000' in abandoned 2 7/8" csg. string & dump 20' sand on plug.
4. Perforate abandoned 2 7/8" csg. string & 8 5/8" csg. w/2-holes @ 1555'.
5. Cement 11 3/4" x 8 5/8" csg. Annulus w/500 sx. class 'H' cement & circulate. Squeeze w/addl. 200 sx. class 'H' cement. WOC. Run temperature survey if cement does not circulate. WOC a total of 18 hrs. DOC & test. Pull RBP from both strings.
6. Run production equipment. Test & return to production.

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



TITLE Asst. Dist. Supt.

DATE 1/21/81

SIGNED

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

APPROVED BY

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

LEA

WELL FILE

N.M. "O" St. (NCT-1) (EXP) TX WI 100% Est. #1-3525	16	2-25-81	(y) 2-7/8" @ 6797 (z) 2-7/8" @ 6800	RECOMMENDED REMEDIAL WORK: Correct salt wtr flow.	6800 6790 PB
(y) Blinebry Zone	(z) Glorieta Zone				
Cardinal Survey ran tracer survey fr. surf to 1600'. (RA mtrl dissipated @ 1600')					
Prep to sqz. Inj rate @ 2 BPM @ 900#.					
No. of Days: Est: 6 Comm: 1			Cash: Est: \$30,000 Comm: \$1,600		
<u>2/27-3/2-81</u>					
2-27 Halli sqzd down 11-3/4" x 8-5/8" ann w/700 sx Cl H cmt w/2% CaCl @ 2 BPM-900					
JC 11 AM 2-26-81. Jarrel Services ran Temp Survey. Btm. of cmt @ 2000'. Plcd back					
on prod. JC 5:30 PM 2-26-81. Pmpg-no gauge.					
2-28 P/24 hrs, 35 BNO, 51 BSW.					
3-1 P/24 hrs, 38 BNO, 48 BSW.					
3-2 P/24 hrs, 41 BNO, 35 BSW.					
No. of Days: Est: 6 Comm: 2			Cash: Est: \$30,000 Comm: \$10,100		
<u>3-3/5-81</u>					
3-3 P/24 hrs, 41 BNO, 35 BSW.					
3-4 Rds prt'd.					
3-5 W/O plg unit.					
No. of Days: Est: 6 Comm: 2			Cash: Est: \$30,000 Comm: \$10,100		
<u>3-6/12-81</u>					
RJ Permian WS. RIH. Fished rds. Chgd pmp. Plcd back on prod. P/34 hrs, 46 BO, 46					
BW. On 24 hr PT ending 8:30 AM <u>3-9-81</u> . Rec 45 BNO, 45 BSW. GOR-1146. Grav 37.1.					
Prod fr 2-7/8" vacuum-Glorietta pfs 6167-6180'. 1½" pmp. 8-64" SPM. Prod before					
Workover was 41 BOPD. Allow 45 BOPD.					
No. of Days: Est: 6 Comm: 3			Cash: Est: \$30,000 Comm: \$11,800		

FINAL REPORT

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

L CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fee

5b. State Oil & Gas Lease No.

B-155

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER	7. Unit Agreement Name --
2. Name of Operator Texaco Inc.			8. Farm or Lease Name N. M. 'O' St. NCT-1
3. Address of Operator P. O. Box 723, Hobbs, New Mexico 88240			9. Well No. 14
4. Location of Well: UNIT LETTER J FEET FROM THE LINE AND 2086 FEET FROM THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMMPM.			10. Field and Pool, or Wildcat Vacuum Wolfcamp & Vacuum ACo North
11. Elevation (Show whether DF, RT, CR, etc.) 3992' (GR)			12. County Lea

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

NOTICE OF INTENTION TO:

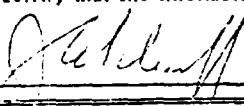
SUBSEQUENT REPORT OF:

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 OPS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Repair Waterflow
OTHER <input type="checkbox"/>			

17. 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. Rigged Up. Pulled rods & tubing.
2. Set RPP @ 8000' in 3 1/2" Csg. string & @ 6200' in Wolfcamp.
3. Cemented 11 3/4" x 9 5/8" Csg. Annulus w/800 sx. class 'H' cement containing 2% CaCl. WOC. Temperature survey indicates cement from surface to 2000'. Tested OK. Pull RBPS.
4. Install producing equipment. Test & return to production.

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

SIGNED 

TITLE Asst. Dist. Supt.

DATE 1/22/81

JAN 26

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

*NEW FIVE*SUBMIT IN TRIPLEX  
(Other instructions  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

**NM-10934**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

-

7. UNIT AGREEMENT NAME

-

8. FARM OR LEASE NAME

**C.C. Fristoe 'A' Fed. NCT-1**

9. WELL NO.

**10**

10. FIELD AND POOL, OR WILDCAT

**Justis Blinebry**11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA**Sec. 35, T-24-S, R-37-E**

12. COUNTY OR PARISH

13. STATE

**Lea****New Mexico**1. OIL  GAS  OTHER

2. NAME OF OPERATOR

**TEXACO Inc.**

3. ADDRESS OF OPERATOR

**P. O. Box 723 - Hobbs, New Mexico 88240**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.  
At surface **660' FWL & 2080' FNL of Section 35, T-24-S,  
R-37-E, Unit Letter 'E', Lea County, New Mexico.**

14. PERMIT NO.

**Regular**

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

**3200' (DF)**

16.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

FRACTURE TREATMENT

REPAIRING WELL

SHOOT OR ACIDIZE

ALTERING CASING

ABANDON\*

ABANDONMENT\*

(Other) \_\_\_\_\_

REPAIR WELL

(Other)

(NOTE: Report results of multiple completion on Well Completion or Re-completion 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.) \*

1. Rigged up. Pull rods & pump. Install BOP, pull tubing.
2. Set RBP @ 5135' and pkr @ 5087'. Test csg and pull pkr. Log well.
3. Perforate 2-7/8" csg w/2 jet shots @ 2270'.
4. Set cement retainer. Squeeze perforations @ 2270' w/1000 sx Class '#' cement.
5. Perforate 2-7/8" csg w/2 jet shots @ 2083'.
6. Squeeze 2-7/8" perforations @ 2083' w/3000 sx Hallite & 500 sx Class 'C' cement. Job complete 10:45 P.M., 10-9-77. WOC. DOC & test. Tested O.K.
7. Pull plug. Set pkr @ 5100'. Acidize perforations 5208-5707' w/1500 gals 15% NE acid in 3 equal stages using 200# rock salt between stages. Flush w/40 bbls. treated water.
8. Set RBP @ 5100' & pkr. @ 5068'. Squeezed perforations 2083' & 2270' w/300 sx Class C cement. Job complete 3:00 P.M., 10-19-77. DOC. Test w/700#.
9. Resqueeze w/100 sx Class C cement. DOC. Tested w/700#. Tested O.K.
10. Install pumping equipment.
11. On 24 hr. potential test ending 11-8-77, well pumped 20 bbls. oil & 23 BW, GOR 1640.

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

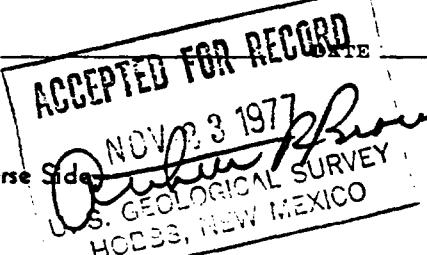
SIGNED

TITLE **Asst. Dist. Supt.**DATE **11-18-77**

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

TITLE \_\_\_\_\_



\*See Instructions on Reverse Side

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F.I.C.	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-101  
Effective 1-1-65

*WELL FILE*

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fer <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR THE NOTIFICATION TO KILL OR TEST A WELL THAT HAS BEEN DRILLED INTO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR KILLING OR TESTING AN UNPLUGGED WELL IN THE C-101 FORM.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name		
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>H. T. Mattern</b>		
3. Address of Operator <b>P. O. Box 728 - Hobbs, New Mexico 88240</b>	9. Well No. <b>5</b>		
4. Location of Well UNIT LETTER <u>L</u> , 1649 FEET FROM THE <u>South</u> LINE AND <u>990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>20</u> TOWNSHIP <u>19S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat <b>Eumont Queen (Gas)</b>		
11. Elevation (Show whether DF, RT, CR, etc.) <b>3642' (DF)</b>	12. County <b>Lea</b>		
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:			
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <u>Repair csg leak</u> <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE C-103.			

1. Rigged up. Kill well. Install BOP. Pull tubing.
2. Set RBP @ 3440' & pkr @ 3410'. Test to 1000#. Tested O.K.
3. Clean out to 3639' (TD). Set pkr @ 3415'.
4. Acidize open hole 3470-3639' w/300 gals 15% iron sequestrant acid. Flushed w/16 bbls. treated water.
5. Install production equipment. Return to production.

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

*[Signature]* TITLE Asst. Dist. Supt.

DATE 1-4-78

NEW MEXICO OIL CONSERVATION COMMISSION

*WELL FILE*

No. of Comm. Recipients	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease

State

Fee

5b. State Oil & Gas Lease No.

B-154

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR APPLICANTS TO FILE FOR TRANSFER OF PRODUCING WELLS TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR TRANSFER OF WELL C-101, FOR WHICH PURPOSE ONLY.

6. C'LL WELL  GAS WELL  OTHER

7. Name of Operator

TEXACO Inc.

8. Address of Operator

P. O. BOX 728, HOBBS, NEW MEXICO 88240

9. Location of Well

UNIT LETTER M . 660 FEET FROM THE South LINE AND 660 FEET FROM

THE West LINE, SECTION 1 TOWNSHIP 20-S RANGE 36 -E N.M.P.M.

10. Elevation (Show whether DE, RT, CR, etc.)

11. Unit Agreement Number

12. Farm or Lease Name

New Mexico E St. NCT-

13. Well No.

1

14. Field and Pool, or Wildcat  
Eunice Monument  
Grayburg San Andres

15. County

Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

ALTERING CASING

TEMPORARILY ABANDON

REMEDIAL WORK

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

CASING TEST AND CEMENT JOBS

OTHER

OTHER

17. 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. Rigged up. Pulled rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3690'. Test csg. Tested OK.
3. Perforate 5" csg. w/4-JS @ 2375'.
4. Set cement retainer @ 2333'. Squeeze w/725 sx Class C Neat Cement. Eumont P & A 8-31-
5. Drill out cement & retainer. Test csg. w/1000# for 1 hr. tested Ok.
6. Log well. Release RBP.
7. Set packer @ 3700'. Acidize 5" csg perforations 3784' - 3794' w/1000 gal. 15% NE acid.
8. Install pumping equipment. Test & place on production.

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

Asst. Dist. Supt.

TITLE

DATE 9-22-77

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fed

5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DRILL IN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL  GAS WELL  OTHER: **Triple Completion - Oil & Gas**

2. Name of Operator **TEXACO Inc.**

3. Address of Operator **P. O. Box 728 Hobbs, New Mexico 88240**

4. Location of Well

UNIT LETTER **D** FEET FROM THE **660'** LINE AND **North** FEET FROM THE **990'** LINE AND **East**  
**West** LINE, SECTION **13** TOWNSHIP **20-S** RANGE **37-E** NMPC.

15. Elevation (Show whether DF, RT, GR, etc.)  
**3565' (DF)**

7. Unit Agreement Name

**Skaggs Grayburg Unit**

8. Field or Lease Name

**E. R. Kershaw & Skaggs Grayburg Unit**

9. Well No.

**8 Unit Well 11**

10. Field and Pool, or Wildcat, Eu-mont Gas, Skaggs Grayburg

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING

PLUG AND ABANDON   
CHANGE PLANS

OTHER **Repair Casing String**

SUBSEQUENT REPORT OF:

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER \_\_\_\_\_

ALTERING CASING   
PLUG AND ABANDONMENT

17. 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.

The subject well is a triple completion in the Eumont Gas (3626'-3688'), Skaggs Grayburg (3806'-3821') and East Weir Blinebry (5746 -5878') Zones. The segregation test conducted on the well on Feb. 11, 1980 indicated communication between all three casing strings. Sinker bars were run in the three strings but would not go below  $\pm 3700'$ . It is suspected that the casing strings are parted or collapsed at  $\pm 3700'$ .

Attempts will be made to repair the casing strings. If this is unsuccessful the 2 7/8" strings above 3700' will be pulled, a 100' cement plug will be spotted from 3600'-3700', a retainer will be set at the base of the 9 5/8" surface csg (at 1400') and enough cement will be squeezed below the retainer to fill all void below the retainer.

Attempts will be made to recondition or plug this well by April 1, 1980.

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

*Jelchaff*

TITLE **Asst. Dir. Dept.**

DATE **2-27-80**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Skaggs Grayburg  
Unit  
(EXP)  
Est. #3654  
TX WI 77.24164%

11

4-26 J

2-7/8" @  
4006  
(Eumont)  
2-7/8" @  
6147  
(Sk-Grybrg)  
2-7/8" @  
6179  
(E.Weir Blnb)

RECOMMENDED KEDIAL WORK:  
Repair communication & sqz  
off wtr flow as ordered by  
NMGCC

4006  
(Eumon  
6147  
5700  
PB  
(Sk-Gr  
6179  
(E.W.B

## WELL FILE

(This well was previously reported as L.R. Kershaw #8 & Skaggs Grayburg #11 on first report dated 5-1-80. S/B Skaggs Grayburg #11)

Ralph Johnson Rig III & RU 4-26-80.

Blnb: WIH w/Ktrt bit & 2-1/16" tbg to 3999'. POH.

Eum: No work.

Sk-Gr: WIH w/2-5/16" Ktrt bit & 2-1/16" tbg. Tgd btm @ 3873'. Could not break circ. Rotated 30 min. Did not make any hole. POH. Markings on bit indicated junk in hole. Ran 2-5/16" OD Ktrt shoe on 2-1/16" tbg. Drd on junk @ 3873'. Fell thru & pshd to 4024'. POH.

No. of Days: Est: 12 Comm: 4

5-2/8-80 Cash: Est: \$50,000 Comm: \$7,000

Blnb: Ran gauge ring to 4080'. Set CIBP @ 4050'. Sptd cmt 4008-4050 w/bailer. Set CIBP @ 3800'.

Sk-Gr: Ran gauge ring to 3910'. Set CIBP @ 3890 & 3800'.

Eum: Ran gauge ring to 3744'. Set CIBP @ 3720'. Ran cmt rtrn & set @ 3547'. Pld strgr out of rtrn. Had communication btwn all 3 strings. Held press on Sk-Grybrg & Bl csg. Sqz dn

Eumont w/100 sx C1 C cmt to 2400#. Sqz 95 sx in com & behind csg. POH & SI w/500# press.

McCullough ran cmt bond log. Log indic brdg @ 1970 & 1415'. TOC @ 2019'. Perf 2 JS @ 1955'. Pmp dn 9-5/8" csg w/255 BFW @ 350#. Did not break circ. Pmp in Eumont 1/2 BFM

@ 1200#. Total 55 BW. Did not break circ. Set 2-7/8" CIPB @ 1950. Dmpd 42' cmt on plug from 1950-1908. POH. McCull perf 2 holes @ 1410. Pmpd dn 2-7/8" csg @ 2000#. Broke circ to surf w/150 BFW @ 1200#. Circ 150 bbls FW @ 1200#. P/dn 2-7/8" Eum string. Broke circ out 9-5/8" csg. Cmtd w/300 sx C1 C dn 2-7/8" Eum csg thru perfs @ 1410. Cnt circ. SI

9-5/8" csg & sqz 100 sx C1 C cmt to 1000#. Ospld w/fr wtr. Job comp 10:30 a.m. 5-7-80.  
RD.

No. of Days: Est: 12 Comm: 9

Cash: Est: \$50,000 Comm: \$33,470

-2/15-80

Blnb: SI w/CIBP @ 4050. PB 4008'.

Eum: SI w/CIEP @ 1950. PB 1908'.

Sk-Gr: RIH w/2-5/16" flat bottom mill on 1-5/8" DP. Tgd TOC @ 3672'. DOC to 3692'. Ran to 3800'. Tagged first CIBP. Press t std to 1000# 30 min - OK. D/O plug & drop thru to second plug @ 3890'. D/O second plug. Ran to 4053' w/mill before tagging more junk. POH. Ran 2-1/16" tbg & rods. Sat pmp jack. Placed well on prod 1 p.m. 5-13-80. P/21 hrs, 18 BNO, 56 BLW. (-124 BLW).

No. of Days: Est: 12 Comm: 13

Texarad 77.24 Cash: Est: \$50,000 Comm: \$59,000

E 8081

## SUBSEQUENT OPERATION REPORT

5-16/22-80

HOBBS DISTRICT	MORNING	AREA
WORKOVER COST	45572	NMOCB
PAYOUT	45572	Receiv'l
Comm:	\$59,000	

Blnb: SI-TRO.

Eum: SI-TRO.

Sk-Gr: P/168 hrs, 62 BNO + 124 BLW + 42 BSW.

No. of Days: Est: 12 Comm: 13

WORKOVER COST \$50,000 PAYOUT Comm: \$59,000

5/23-29/80

Blnb: SI w/CIBP @ 4050. PB 4008'.

Eum: SI w/CIBP @ 1950. PB 1908'.

Sk-Gr: P/24 hrs 3 BNO & 16 BSW. On 24 hr OPT end 10 AM 5-23-80 P/C B0, 14 BW. GDR 2200. GP 36.5 1-1/4" pmp. 17-42" SPM. Prod'g fr Skaggs-Grayburg perfs 3806-3880'. Test prior to WO - 0. Allow 6 BOPD.

No. of Days: Est: 12 Comm: 13

Est = 3654

Cash: Est: \$50,000 Comm: \$59,000

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

✓	✓	✓
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

INFO FILE

CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

SUNDY 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. Unit Agreement Name Skaggs Grayburg Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Skaggs Grayburg Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 3
4. Location of Well UNIT LETTER I FEET FROM THE East LINE AND 1980 FEET FROM	10. Field and Pool, or Wildcat Skaggs Grayburg
THE South LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 3565' (DF)	12. County Lea

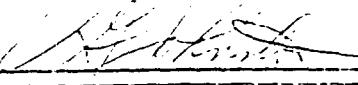
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

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"/>	<input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	<input type="checkbox"/>
OTHER <input type="checkbox"/>	<input type="checkbox"/>	OTHER Repair Waterflow <input checked="" type="checkbox"/>	<input type="checkbox"/>

17. 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. Rigged up. Pull pkr & tbg.
2. Set RBP @ 3735'. Log well. Tested csg. Tested OK.
3. Squeeze 8-5/8" - 5-1/2" csg annulus w/2000 gals Halli flo-check, 300 sx Lite cement containing 15# salt per sack & 400 sx Class 'C' cement containing 2% CaCl.
4. Ran Temperature Survey. Cement from 2000' - surface. Pull RBP.
5. Ran tubing w/pkr. & set @ 3713'.
6. Return to Injection, 9-25-80.

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

SIGNED 

TITLE Asst. District Supt.

DATE 10-3-80

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE 05-11-81

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

WELL # 6

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
TEXACO Inc.

3. ADDRESS OF OPERATOR

P.O. Box 728, Hobbs, NM 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 560' FWL & 1980' FNL  
AT TOP PROD. INTERVAL: (Unit Letter "E")  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) OF: Test f/csg leak & treat	<input type="checkbox"/>	<input type="checkbox"/>

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.)\*

1. Rigged up. Pull rods & pump from Drinkard string. Clean out Drinkard string.
2. Using pkr & RSP, located leak opposite Blinebry perfs, repairs unnecessary.
3. Clean out Tubb string & test. Tested OK.
4. In Blinebry zone, set RSP @ 5323' & pkr. @ 5602'. Acidize 2-7/8" csg perfs 5644-5745' w/ 1000 gals gelled 2% KCl wtr followed by 2000 gals 20% NE Acid. Flush w/17 bbls treated wtr.
5. In Tubb zone, set RSP @ 6421' & pkr. @ 6136'. Acidize 2-7/8" csg perfs 6204-6313' w/1000 gal. gelled 2% KCl water followed by 2000 gal. 20% NE Acid. Flushed w/18 bbls. 2% KCl wtr.
6. Pull RSP from Blinebry & pkr. from Tubb zone.
7. Set pkr. in Drinkard string @ 6846'. Acidize perfs 6960-7076' w/1000 gal. gelled 2% KCl water pad & 2000 gal. 20% NE Acid in 2 stages using 500# rock salt between stages. Flushed w/21 bbls. treated water.
8. Install pumping equipment. On 24 hr potential test well pumped 63 BO, 64 BW, GOR 762.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED J. L. Schaffer TITLE Asst. Dist. Supt. DATE 5-30-80

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

TITLE \_\_\_\_\_  
ACCEPTED FOR RECORD

DATE \_\_\_\_\_

RECEIVED

JUN 2 1980

JUN 11 1980  
\*See Instructions on Reverse Side  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

UNI... STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

*WELL FILE*  
**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 Form 9-331-C for such proposals.)

1. oil  gas  well  other

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 852' FNL, 1650' FWL

AT TOP PROD. INTERVAL: (Unit letter 'C')

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF

SUBSEQUENT REPORT OF:

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON\*

(other) Report of: Repair well &  
Downhole Commingle

5. LEASE

NM-14218

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

C. C. Fristoe 'B' Fed. NCT-2

9. WELL NO.

9

10. FIELD OR WILDCAT NAME  
Justis Blinebry & Tubb Drinkard

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 35, T-24-S, R-37-E

12. COUNTY OR PARISH Lea 13. STATE New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3195' (DF)

[REDACTED] (NOTE: Report results of multiple completion or zone change on Form 9-330.)

JAN 1 - 1980

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

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.)\*

1. Rigged up.
2. Kill Langlie-Mattix Zone. Set cement retainer @ 3252. Squeeze 2 7/8" Langlie-Mattix perfs 3349-3503 w/75 sx class 'C' neat cement. Langlie-Mattix P & A, 12-19-79.
3. Set RBP in Blinebry String @ 5201. Tested csg. Tested OK.
4. Set RBP in Drinkard String @ 6000. Set pkr @ 5800. Tested csg 5247-6000 w/600#. Csg did not hold. Test from 5247-surface. Tested OK.
5. Perforate 2 7/8" Drinkard Zone w/2 JSPF 5710-5720.
6. Set pkr @ 6012. Acidize perfs 6106-6168 w/3000 gals 15% NE acid in 3 equal stages using 300# rock salt between stages.
7. Install pumping equipment. On 24 hrs Potential Test ending 1-8-80. P/25 BO, 22 BW, GOR 816. Producing as Blinebry & Tubb-Drinkard Downhole Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft. Commingle.

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

SIGNED

*John J. Schaff*

TITLE Asst. Dist. Supt.

DATE 1-11-80

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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LAND OFFICE	
OPERATOR	

WELL FILE

5a. Indicate Type of Lease

State

Fee

5b. 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 - C" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER -	7. Unit Agreement Name
2. Name of Operator <b>TEXACO Inc.</b>			8. Farm or Lease Name <b>M. Weatherly</b>
3. Address of Operator <b>P.O. Box 728 - Hobbs, New Mexico 88240</b>			9. Well No. <b>2</b>
4. Location of Well UNIT LETTER <b>E</b> . 1980 FEET FROM THE <b>North</b> LINE AND <b>990</b> FEET FROM			10. Field and Pool, or Wildcat <b>Eunice North San Andres (Gas)</b>
THE <b>West</b> LINE, SECTION <b>17</b> TOWNSHIP <b>21-S</b> RANGE <b>37-E</b> NMPLM.			
11. Elevation (Show whether DF, RT, GR, etc.) <b>3485' (GR)</b>			12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER Set RPP to Eliminate Water

ALTERING CASING   
PLUG AND ABANDONMENT

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1f03.

- Rigged up. Kill well. Install BOP. Pull tubing. Set RPP @ 4023'. Test csg w/600#. Tested OK.
- Set pkr @ 3858'. Load Annulus w/73 Bbls. Corrosive inhibited fresh water.
- Tested csg to 600#. Tested O.K.
- Test and return well to production.

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

SIGNED J. Schaffer  
CITY  
Jerry Schaffer  
Date 1 Sept 79

TITLE Asst. District Supt.

DATE 6-22-79

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

WELL FILE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FEL & 660' FNL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON\*

(other) Repair csg leak \*

SUBSEQUENT REPORT OF:

RECEIVED

JAN 9 1980

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

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.)\*

1. Rigged up. Pull rods & pump. Install BOP. Pull tbg.
2. Set RBP @ 4648' & spot 16' sand on plug. Test csg for leak.
3. Found leak @ 367'. Squeezed csg leak w/400 sx class 'C' cement. Cement circulated. Pump 200 sx behind 4½" csg. Tested csg. Would not hold.
4. Squeezed 4½" csg leak @ 367' w/2000 gals. Halli-Flochek & 200 sx class 'C' cement. WOC 48 hrs. Tested w/600#. Tested OK.
5. Install pumping equipment. On 24 hrs. Potential Test ending 12-30-1979, well pumped 100 BO, 5 BW, GOR 450. Return to production.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED

*Stiles*

TITLE Asst. Dist. Supt.

DATE 1-8-80

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

DATE

*AK Hall*

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR

TEXACO Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE:

AT TOP PROD. INTERVAL: *660/N 1980/W*

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF   
FRACTURE TREAT   
SHOOT OR ACIDIZE   
REPAIR WELL   
PULL OR ALTER CASING   
MULTIPLE COMPLETE   
CHANGE ZONES   
ABANDON\*   
(other)

SUBSEQUENT REPORT OF:

*RECEIVED*  
JAN 11 1980

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

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.)\*

1. Rig up. Install BOP. Run RBP & pkr.
2. Test 4½" csg for leak. Clean out to 4790'.
3. Perforate 4½" csg w/4 JS @ 4786'. Set cement retainer @ 4775'. Load annulus w/treated water.
4. Set cement retainer @ 4775'. Squeeze perfs @ 4786 w/100 sx class 'C' cement. WOC. DOC. Test csg.
5. Perforate 4½" csg above 4712'. Acidize perfs w/2000 gals 15% HCl acid.
6. Install pumping equipment. Test & return to production.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED *J. Hall* TITLE Asst. Dist. Supt. DATE 1-9-80

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_ APPROVED  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

*JAN 11 1980*  
*A. K. Hall*  
ACTING DISTRICT ENGINEER

NEW MEXICO

IEA

## WELL FILE

Cotton Draw Unit (EXP)	5	3-24-81	4½" @ 4850	RECOMMENDED REMEDIAL WORK:	4851
TX WI 23.469388%				Cmt sqz wtr channel.	4778
Est. #3573					PB
MIRU Ralph Johnson Rig 3-24-81. Instld BOP. Pld & LD 1 jt tbg. Ran 3-7/8" bit & 4½" csg scraper on 2-3/8" tbg. Tag'd fill @ 4677'. DO to 4779'. Cir hole cln. PU into csg. SION. (-30 BLW).					
No. of Days: Est: 10 Comm: 2			Cash: Est: \$39,900 Comm: \$3,500		
<u>3/27-4/1-81</u>					
POH. Ran prod tbg. Rmvd BOP. Ran tbg @ 4557'. Ran pmp & rds. Hung on. RD 3-28-81 Made eng rprs. Hkd up FL. On prod 3 PM 3-30-81. P/24 hrs, 0 BO, 30 BLW, 281 BSW.					
No. of Days: Est: 10 Comm: 4			Cash: Est: \$39,900 Comm: \$6,000		
<u>4-2-81</u>					
P/24 hrs, tr oil, 332 BSW.					
No. of Days: Est: 10 Comm: 4			Cash: Est: \$39,900 Comm: \$6,000		
<u>4-3/9-81</u>					
4-3 P/24 hrs, 0 BO, 312 BSW.					
4-6-P/72 hrs, 0 BO, 851 BSW.					
4-7 P/24 hrs, 0 BO, 239 BSW.					
4-8 P/12 hrs, 0 BO, 106 BSW. Card Surv to run prod profile. Unable to get blw 1000'. Hung tool 4 blw hd. Cut line & tied off. Prep to rtrv tool when plg unit available.					
No. of Days: Est: 10 Comm: 4			Cash: Est: \$39,900 Comm: \$7,000		
<u>4-10/16-81</u>					
MIRU Ralph Johnson Rig 4-11-81. Rds stuck. BO rds & stripped out of hole. WIH. Set RBP @ 4602'. PSA 4570'. Tstd RBP to 1000#. OK. Tstd 4½" csg 4 holes btwn 4203-4232' 7 1006'-1038'. Csg appears to be bad fr 1006-4232'. P/2-3/4" BPM @ 200#. POH. Drpd 1 sk of sd on RBP @ 4602'. McCull ran csg inspection log fr 4554-330'. Holes every jt fr 2550-4120'. Hole @ 2245'. Holes @ 1104', 1024', 1004 954', 838', & 830'. Ran rtrvg tool on 4½" Bkr pkr. PSA 4080'. S/4 hrs, rec no oil 84 Bbls brine. No gas show. SFL 200' FS/EFL 800' FS. Rel'd pkr & wshd sd off RBP 4602'. Rel'd RBP & POH. Prep to LD rds & tbg.					
No. of Days: Est: 10 Comm: 8			Cash: Est: \$39,900 Comm: \$7,800		
<u>4-17/23-81</u>					
LD rds & tbg. RD. SI-O effective <u>4-16-81</u> . Workover suspended-4½" csg has numerous leaks.					
No. of Days: Est: 10 Comm: 9			Cash: Est: \$39,900 Comm: \$21,000		

FINAL REPORT

NEW MEXICO  
LEA

Cotton Draw 5 3-24-81 4½" @ 4850 RECOMMENDED REMEDIAL WORK:  
Unit (EXP) TX WI 23.469388% Cmt sqz wtr channel.  
Est. #3573

4851  
4778  
PB

Correction to report dated 4-17/23-81. Should have read: "Well returned to  
TR-O status effective 4-16-81." FINAL REPORT.

SUBSEQUENT OPERATION REPORT

HOBBS DISTRICT \_\_\_\_\_ AREA

WORKOVER COST \_\_\_\_\_ PAYOUT \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REQUESTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW FILE

WELL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
3b. State Oil & Gas Lease No.	
B-1189	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEH OR PLUG BACK TO A DIFFERENT RESERVOIR;  
USE "APPLICATION FOR PERMIT - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name Vacuum Grayburg San Andres Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 7
4. Location of Well UNIT LETTER N FEET FROM THE LINE AND 1987 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 18-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat Vacuum Grayburg San Andres
15. Elevation (Show whether DF, RT, CR, etc.) 4013' (DF)	12. County Lea

16. 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 OPSNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>
OTHER _____	<i>Repair Water Flood</i>		

17. 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. Rigged up. Pull production equipment. Install BOP.
2. Set RBP @ 3000' & dump 10' Sand on plug. Perforate 5 1/2" Csg w/2-JS @ 1675'.
3. Set cement retainer @ 1591'. Cement perfs. @ 1675' w/600 Sx. Class 'H' Cement containing 2% CaCl. cement circulated. Squeeze w/add'l 250 Sx. Class 'H' Cement. WOC. DOC. & Test. Tested OK.
4. Install production equipment. Test & return to production.

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

SIGNED

*J. Schaff*

TITLE Asst. Dist. Mgr.

DATE 6-3-81

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

WIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
CITY	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease

State

Fee

5b. State Oil & Gas Lease No.

B-1031

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name <b>Central Vacuum Unit</b>
2. Name of Operator <b>Texaco Inc.</b>	8. Farm or Lease Name <b>Central Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico</b>	9. Well No. <b>10</b>
4. Location of Well UNIT LETTER <b>J</b> . 1980 FEET FROM THE <b>South</b> LINE AND <b>2310</b> FEET FROM THE <b>East</b> LINE, SECTION <b>6</b> TOWNSHIP <b>18-S</b> RANGE <b>35-E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg</b> <b>San Andres</b>
11. Elevation (Show whether DF, RT, GR, etc.) <b>3975' (GR)</b>	12. County <b>Lea</b>

16. 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <b>Repair waterflow &amp; treat</b> <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>			

17. 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. Rigged up. Pull rods & pump. Pull tubing.
2. Set RBP @ 3800'. Perforate 5 1/2" csg w/2-J5 @ 1555'.
3. Set cement retainer @ 1491'. Cement 5 1/2" csg perfs. @ 1555' w/680 sx. WOC.
4. Resqueeze w/60 sx. class 'C' Thix-set cement. WOC. DOC. Tested OK.
5. Set pkr. @ 4000'. Acidize open-hole 4070'-4700' w/7000 gals 20% NEFE Acid in 5-stages using 2000# moth balls & 200# rock salt between stages.
6. Install pumping equipment. Test & return to production.

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

2/11/81

TITLE **Asst. Dist. Mgr.**

DATE **2/13/81**

Dale S. Jones  
Deputy Secretary

TITLE

DATE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLEX  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-5  
Expires August 31, 1985  
LEASE DERIVATION AND SERIAL  
12612

OPERATOR'S COPY

**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.)

1. OIL WELL  GAS WELL  OTHER Injection Well

2. NAME OF OPERATOR

Texaco Producing Inc.

3. ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below)  
At surface

Unit Letter E, 2310 feet from the north line and  
330 feet from the west line.

14. PERMIT NO.

15. ELEVATIONS (Show whether D.F., ST., GR. etc.)

30-025-11166

3306 DF

6. WELL NO.

207

10. FIELD AND POOL OR WILDCAT

Jalmat Yates Seven River

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

19-24S-37E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

ABANDONMENT\*

REPAIR WELL

CHANGE PLATE

(Other)

(Other) Repair casing leak

X

SUBSEQUENT REPORT OF:

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

(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.)

- 1) MIRU Pull 2 3/8" I.P.C. Tubing. Install BOP.
- 2) TIH with workstring, packer and CIBP and locate leak, set CIBP @ 2900'.
- 3) Establish an injection rate out of the 7" casing using produced water if possible, POH.
- 4) TIH with 7" cement retainer and set the retainer above the casing leak.
- 5) Squeeze the casing leak with 300 sx of class H cement.
- 6) Pull out of the retainer and reverse out excess cement.
- 7) POH and WOC.
- 8) TIH with workstring and 6 1/2" bit and drillout retainer and cement to the CIBP.
- 9) Test casing and resqueeze if necessary.
- 10) Drillout the CIBP. POH.
- 11) TIH with 3 7/8" bit and c/o fill. POH.
- 12) Test workstring and packer and TIH set packer at 3313'.
- 13) Acidize Langlie Mattix openhole (3485'-3576') and Langlie Mattix perforations (3408'-3468') 33 shots with 3,000 gal 20% HCL NEFE with rock salt as a diverting agent. TOH.
- 14) TIH and set BP at 3313'.
- 15) Test workstring and packer and TIH set packer at 2948'.
- 16) Acidize Jalmat perforations (3006'-3280') 76 shots with 2,000 gal 20% HCL NEFE with rock salt as a diverting agent.

\*\*SEE BACK.

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

SIGNED

W.B. Lohr

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

3-3-86

Subject to  
Like Approval  
by State

\*See Instructions on Reverse Side

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 17:** Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well shut down.

## PRIVACY ACT

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you shall furnish the following information in connection with information required by this application.

**AUTHORITY:** 40 U.S.C. 181 et. seq., 351 et. seq., 25 U.S.C. et. seq.; 43 CFR 3160.

**PRINCIPAL PURPOSE:** The information is to be used to evaluate, when appropriate, approve applications, and report completion of secondary well operations, on a Federal or Indian lease.

**ROUTINE USES:** (1) Evaluate the equipment and procedures used during the proposed or completed subsequent well operations. (2) Request and grant future applications to perform those actions covered by 43 CFR 3162.3-2(2). (3) Analyze future applications to drill or modify operations in light of data obtained and methods used. (4)(5) Information from the records and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecution.

**EFFECT OF NOT PROVIDING INFORMATION:** Filing of this notice and report and disclosure of the information is mandatory once an oil or gas well is drilled.

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501, et. seq.) requires us to inform you that:

This information is being collected in order to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

This information will be used to report subsequent operations once work is completed and when requested, to obtain approval for subsequent operations not previously authorized.

Response to this request is mandatory for the specific types of activities specified in 43 CFR Part 3160.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

DO YOU OWN THE ESTATE?	<input type="checkbox"/>
CITY OF BUREAU	<input type="checkbox"/>
SANTA FE	<input type="checkbox"/>
FILE	<input type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
OPERATOR	<input type="checkbox"/>

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

3a. Indicate Type of Lease
State <input type="checkbox"/>
Fee <input checked="" type="checkbox"/>
3. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN A WELL INTO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR DRILLING PROPOSALS.)

oil well

gas well

other: Injection Well

Name of Operator

Texaco Producing Inc.

Address of Operator

P. O. Box 728, Hobbs, NM 88240

Location of well

UNIT LETTER: J, 2310 FEET FROM THE South LINE AND 2310 FEET FROM THE East LINE, SECTION 24, TOWNSHIP 24S, RANGE 36E, UTM. 3325 DF

7. Unit Agreement Name

Cooper Jal Unit

8. Farm or Lease Name

9. Well No.

148

10. Field and Pool, or Wildcat

Langlie Mattix Seven

15. Elevation (Show whether DF, RT, GR, etc.)

12. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

IF FORM REUSED IN WORK   
TEMPORARILY ABANDON   
ALTER OR ALTER CASING

PLUG AND ABANDON   
CHANGE PLANS

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER

ALTERING CASING   
PLUG AND ABANDONMENT

OTHER Repair Casing Leak

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FILE 1103.

- 1) MIRU. Pull 2 3/8" cement lined tubing. Install BOP.
- 2) TIH with workstring, packer, and CIBP and locate casing leak.
- 3) Establish an injection rate out of the 5 1/2" casing using produced water if possible. TOH.
- 4) TIH with cement retainer and set the retainer above the casing leak.
- 5) Squeeze the casing leak with 300 sx class H cement.
- 6) Pull out of the retainer and reverse out excess cement.
- 7) POH and WOC.
- 8) TIH with workstring and 4 3/4" bit and drill out retainer and cement to the CIBP.
- 9) Test casing and resqueeze if necessary.
- 10) Drill out the CIBP and c/o fill. POH
- 11) Test workstring and TIH. Set packer at 3391'.
- 12) Pressure upon annulus upto 700 PSI.
- 13) Acidize open hole (3465'-3550') with 2,000 gals 20% NEFE Acid with rock salt as a diverting agent.
- 14) TOH with workstring and packer.
- 15) TIH with injection tubing and place well on injection.
- 16) Run injection profile after injection rate has been established.

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

W.B. Leder

TITLE Dist. Oper. Mar.

DATE 01/20/86

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

TITLE \_\_\_\_\_

DATE JAN 23 1986

## ENERGY AND MINERALS DEPARTMENT

NO. OF EDITIONS ISSUED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-77

5a. Indicate Type of Lease

State Fee 

5. State Oil &amp; Gas Lease No.

B-1606

## 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 - C" (FORM C-101) FOR SUCH PROPOSALS.)SELL SAB WELL 

OTHERS:

Name of Operator

TEXACO INC.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

LOT LETTER L FEET FROM THE West LINE AND 1980 FEET FROMDIRT LETTER South LINE, SECTION 31 TOWNSHIP 17-S RANGE 35-E MMFM.

15. Elevation (Show whether DF, RT, GR, etc.)

3983' (GR)

12. County

Lea

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

RM REMEDIAL WORK

PLUG AND ABANDON REMEDIAL WORK ALTERING CASING SHARPLY ABANDON COMMENCE DRILLING OPS. PLUG AND ABANDONMENT OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB OTHER WORK Run Casing Liner

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. RIG UP. INSTALL BOP. PULL RBP @ 3900'.
2. SET CIBP @ 4020' AND SPOT 20' SAND ON PLUG.
3. RUN 4000' 5" 11.5# K-55 FLUSH-JOINT LINER W/PACKER SHOE AND BAFFLE COLLAR. SET ON TOP OF 4 1/2" LINER @ 4001'.
4. CEMENT W/500 SX CLASS B CEMENT CONTAINING 2% CACL. CIRCULATE CEMENT. WOC. DOC. TEST.
5. RUN 2 3/8" TUBING AND SUBMERSIBLE PUMP. TEST AND RETURN TO PRODUCTION.

Work completed  
12/10/84 No  
Subsequent found.

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

*J. S. L.*

TITLE District Operations Mgr DATE 11-14-84

ED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURES OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
PILOT	
REG. OFF.	
LAND OFFICE	
OPERATOR	

WELL FILE

OIL CONSERVATION DIVISION

P. O. BOX 2008  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

S. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fed <input type="checkbox"/>
S. State Oil & Gas Lease No.	
B-1606	

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL  GAS WELL  OTHER -

2. Name of Operator

Texaco Inc.

3. Address of Operator

P.O. Box 728, Hobbs, New Mexico 83240

4. Location of Well

UNIT LETTER I, 660 FEET FROM THE West LINE AND 1980 FEET FROM

THE South LINE, SECTION 31 TOWNSHIP 17-S RANGE 35-E NADP.M.

15. Elevation (Show whether DF, RT, GR, etc.)  
3983' (GR)

12. County  
Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS   
OTHER \_\_\_\_\_

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOBS   
OTHER Repair Water Flow

ALTERING CASING   
PLUG AND ABANDONMENT   
OTHER

17. 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. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Spot RBP @ 3900' & spot sand on plug. Isolate leak.
3. Perforate 7" Csg. w/2-JS @ 1560'.
4. Set cement retainer @ 1504'. Squeezed perfs. 1560' w/350 sx Class 'C' cement, 1500 gals. flochek followed by 100 sx. Class 'C' Cement. WOC. DOC.
5. Tested csg to 800# for 30 minutes, 9:30-10:00 AM, 4-12-82. Tested OK.
6. Install pumping equipment. Test & return to production.

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

*John F. Hart*

NAMED Asst. Dist. Manager

DATE 5-14-82

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Form 3160-5  
(November 1983)  
(Formerly 9-351)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE  
(Other instructions or  
reverse side) - - -

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-032161

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Cootier Jai Unit

8. NAME OF LEASER

Chamisa Producing Inc.

9. ADDRESS OF LEASER

P.O. Box 728, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

Unit letter K, 1980' FSL & 1980' FWL

10. FIELD AND POOL, OR WILDCAT

Langlie Mattix Seven Rivers

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec.18, 24 T. - 37 E

14. ELEVATION

15. ELEVATIONS (Show whether SF, ST, GR, etc.)

30-025-11122

3315' DE

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHOT-OFF  
DRILL THERMAL  
SUBMIT GEOPHYSIS  
REPAIR Casing  
Leak

PULL OR ALTER CASING  
MULTIPLE COMPLETE  
ABANDON\*  
CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHOT-OFF  
FRACTURE TREATMENT  
SHOOTING OR ACIDIZING  
(Other) Repair Casing Leak

REPAIRING WELL  
ALTERING CASING  
ABANDONMENT\*

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

17. If well is drilled or re-drilled (Clearly state all pertinent detail and give pertinent dates, including estimated date of starting any new holes if well is circumferentially drilled. Give subsurface locations and measured and true vertical depths for all markers and zones perforated and sealed.)

0-13-1/86 - Drill injection equipment. Tested 5½" casing with RBP and packer. Found bad casing 539' - 914'. Set CIEP @ 1-99'. Squeeze bad casing w/500 sx Class C.

0-17-9/86 - Drill cut cement on 180'-910'. Wouldn't test. Squeeze w/500 sx Class C w/25% CaCl<sub>2</sub>.

04/10-15/86 - Drill cut cement 0'-380'. Wouldn't test. Squeeze w/225 sx Class C w/25% CaCl<sub>2</sub>.

04/16-16/86 - Drilled cement 45'-715'. Wouldn't test. Spot 50 sx. Class C w/10# Cal Seal, 6.5# salt, 3# sand, 2% CaCl<sub>2</sub>, & ½# Flocole @ 717'-467'. SI 650#.

04/21-22/86 - Drill cut cement 205'-720'. Wouldn't test. Spot 50 sx class C w/10# Cal Seal, 6.5# salt, 3# sand, 2% CaCl<sub>2</sub>, & ½# Flocole @ 720'-470'. SI 800#.

4-23-15/86 - Drill cut cement 200'-720'. Wouldn't test. Est. rate ¼ BPM @ 500. Squeeze w/250 sx. Class C w/25% CaCl<sub>2</sub>. SI 800#.

4-20-5/2/86 - Drilled cement 0'-622'. Tested to 500# OK. Drill cut to 720'. Tested 500# to 100# in 30 minutes. Drill cut 745'-780'. Tested csg. 745'-1499' (CIEP) to 500# ok. Spot 50 sx Class C @ 745'-245'. Staged out. in holes located @ 620'-650', Max 750#.

05/05-10/86 - Drill cut cement 310'-715'. Tested 5½" casing 500# to 200# in 30 minutes. Isolate bad casing @ 600'-650' w/phr. Perf. squeeze holes @ 790', 700' & 610'. Can't pump into at 650# circulate packer fluid. Shut down to evaluate for full liner or PFA.

I declare that the foregoing is true and correct

SIGNED

*St. Banning*

TITLE District Admin. Supervisor

DATE 07/16/86

18. Space for Federal or State office use

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

*RJ*

JUL 23 1986

\*See Instructions on Reverse Side

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
NO. OR FOR INFORMATION
CITY & STATE
SANTA FE
FILE
U.S.G.S.
LAND OFFICE
OPERATOR

## O.- CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

3a. Indicate Type of Lease
State <input type="checkbox"/>
Fax <input checked="" type="checkbox"/>
3. State Oil & Gas Lease No.

### SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PULL BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" - FORM C-101 FOR S.I.D. PROPOSALS.)

OIL WELL  GAS WELL  OTHER: Injection Well

Name of Operator

Texaco Producing Inc.

Address: See above

P. O. Box 728, Hobbs, NM 88240

Location: See above

UNIT LETTER H . 2310 FEET FROM THE North LINE AND 990 FEET FROM  
THE East LINE, SECTION 25 TOWNSHIP 24S RANGE 36E NWPM.

15. Elevation (Show whether SF, RT, GR, etc.)  
3295' DF

9. Well No.

144

10. Field and Name of Unit  
Landgrae Mattix Seven  
Rivers Queen

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

REPAIR REPAIR A. WORK   
TEMPORARILY ABANDON   
RE-DRILL OR ALTER CASING

PLUG AND ABANDON   
REMEDIAL WORK   
CHANGE PLANS   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER

ALTERING CASING   
PLUG AND ABANDONMENT

OTHER: Repair Casing

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FILE 1503.

- 1) MIRU. Pull 2 3/8" cement lined tbg. install BOP.
- 2) TIH with workstring, packer, and CIBP and locate casing leak. Set CIBP @ 3359'±.
- 3) Establish an injection rate out of the 5 1/2" casing using produced water if possible. POH.
- 4) TIH with 5 1/2" cement retainer and set the retainer above the casing leak.
- 5) Squeeze the casing leak with 300 sx of class H cement.
- 6) Pull out of the retainer and reverse out excess cement.
- 7) POH and WOC.
- 8) TIH with workstring and 4 3/4" bit and drill out retainer and cement to the CIBP.
- 9) Test casing and resqueeze if necessary.
- 10) Drill out the CIBP and c/o fill. POH.
- 11) Test workstring and TIH set packer at 3331'.
- 12) Pressure upon annulus upto 700 PSI.
- 13) Acidize open hole (3389'-3490') with 2,000 gals 20% NEFE Acid with rock salt as a diverting agent.
- 14) TOH with workstring and packer.
- 15) TIH with injection tubing and place well on injection.
- 16) Run injection profile after injection rate has been established.

Note: I declare the information above is true and complete to the best of my knowledge and belief.

W. B. Loh

TITLE Dist. Oper. Mgr.

DATE 01/20/86

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR

JAN 23 1986

## CIRCULATED COPY

Form 3160-5  
(November 1983)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUMMIT IN TRIPPLICATE.  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 1001-0135  
Expires August 31, 1985

3. LEASE DESIGNATION AND SERIAL NO.

*LC*  
**SH-032715**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**SUNDY 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.)

1. OIL  GAS  WELL  OTHER - Injection Well - Dual

2. NAME OF OPERATOR

TEXACO Producing Inc.

3. ADDRESS OF OPERATOR

P.O. Box 728, Hobbs, New Mexico, 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1980' FSL & 1916.6' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, FT, GR, etc.)

3295' DF

10. FIELD AND POOL, OR WILDCAT

Langlie Mattix Seven  
Rivers Queen

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 19, T24S, R37E

12. COUNTY OR PARISH

13. STATE

Lea

NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

PULL OR ALTER CASING  
MULTIPLE COMPLETE  
ABANDON\*  
CHANGE PLANS

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

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.)\*

- 3/24-26/86 - Pull injection tubing.
- 3/27/86 - Located 5 1/2" casing leaks at 250'-340' w/RBP and packer. Set CIBP @ 1200'.
- 3/30/86 - Cement 5 1/2" casing leaks at 250'-340' w/500 sx. Class "C". SIP - 250 psi.
- 3/31/86 - Drilled cement 250'-690'. Tested squeeze to 415 psi for 30 minutes. Held ok.
- 4/01/86 - Drilled CIBP @ 1200'. Circulate and clean fill from 3610' to 3680'.
- 4/02/86 - Acidize 7 3/8" openhole 3320'-3680' with 5000 gallons 15% NEFE Acid and 1000# rock salt in 2 equal stages. Acidize 5 1/2" casing perforations 3060'-3278' with 5000 gallons 15% NEFE Acid and 1000# rock salt in 2 stages.
- 4/03/86 - Set CIBP @ 1200'. Perforate squeezed holes at 215'. Cement 8 5/8" X 5 1/2" casing annulus with 100 sx. Class "C" w/2% CaCl<sub>2</sub>. Circulated 15 sx. in cellar.
- 4/04-07/86 - Drill out cement from 120'-215'. Test squeeze, 400#-350# in 25 minutes. Located leak @ 270'-330'.
- 4/08-16/86 - Squeeze leak with 50 sx. Class "C" 2% CaCl<sub>2</sub>. Drilled cement 180'-312'. Test holes @ 270'-330' to 500 psi for 30 minutes. Held ok. Drilled CIBP @ 1200' and pushed to 3670' (10' fill). Rerun injection equipment.
- 4/22/86 - 24 Hour Potential: 1000 BWIPD @ 425 psi (50%-Jalmat @ 3060'-3278', 50% Langlie Mattix openhole 3321'-3680').)

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

SIGNED

*J.W. Decker*

TITLE Dist. Adm. Supvr.

DATE 05-15-86

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

ACCEPTED FOR RECORD

*G.W.*  
\*See Instructions on Reverse Side  
JUN 4 1986

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

C CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

RECEIVED	
CIRCULATION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State <input type="checkbox"/>
Fee <input checked="" type="checkbox"/>
5b. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO ABANDON A WELL THAT IS TIED TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR ALL PROPOSALS.)

OIL WELL  GAS WELL  OTHER

Name of Operator

exaco Producing Inc.

Address of Operator

P.O. Box 728, Hobbs, New Mexico, 88240

Location of Well:

UNIT LETTER I, 1980 FEET FROM THE South LINE AND 660 FEET FROM  
THE East LINE, SECTION 18 TOWNSHIP 24S RANGE 37E NEPM.

7. Unit Agreement Name

Cooper Jal Unit

8. Farm or Lease Name

9. Well No.

110

10. Field and Pool, or Wildcat  
Langlie Mattix Seven  
Rivers Queen Grayburg

11. Elevation (Show whether SF, RT, GR, etc.)

3303' GR

12. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

FORM REVIEW IN WORK

TEMPORARILY ABANDON

ALTER CASING

OTHER \_\_\_\_\_

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

CASING TEST AND CEMENT JOB

OTHER \_\_\_\_\_

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE PAGE 1503.

- TOH with injection equipment. Found old squeeze holes at 2185'-2622' leaking.
- Set 5 1/2" CIBP at 2725'.
- Squeeze holes at 2185'-2622' with 250 sacks Class "G" cement. Retainer at 2045'.
- Drill out cement and CIBP and circulated clean to 3587'.
- Acidized 4 3/4" O.H. 3450'-3587' down tubing with 3000 gallons 15% NEFE acid in 2 stages.
- Jet washed 3450'-3587'.
- Tagged PBTD at 3587'. Rerun injection equipment. Packer at 3376'. Tested packer to 500# for 30 minutes. Held okay. Return to injection.
- Potential: 130 BWIPD at 900 psi.

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

*J.W. Browning*

TITLE Dist. Adm. Supvr.

DATE 04-16-86

UNITED STATES  
DEPARTMENT OF THE INTE. OR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR

Getty Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 728, Hobbs, N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE Unit Ltr. N, 660 FSL & 1650 FWI

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH: .

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Downhole commingled		

5. LEASE  
#032650 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
A. B. Coates "D"

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Justis Tubb Drinkard/Fusselman

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 24, T-25S, R-37E

12. COUNTY OR PARISH | 13. STATE  
Lea | NM

14. API NO.

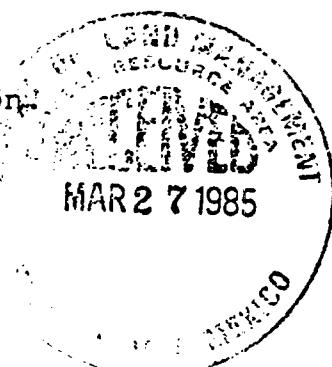
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3079'

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Administrative Order No. DHC-524

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.)

1. Rigged up. Pulled rods and pump.
2. Pulled tbg. and pkr.
3. Ran 2 3/8" tbg. and returned well to production.



3/19/85 - 24 hour test 8 BO, 176 BW, 368 MCFG, GOR 4500, Grav. 37.6.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED W. B. Lub TITLE Dist. Opr. Mgr DATE March 22, 1985

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: DR

APR 2 1985

## WELL FILE

Form C-103  
Revised 10-1-78

CITY	SANTA FE
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

SAFETY DIVISION  
NEW MEXICO 87501

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No.

B-2411

## SUNDY 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.)OIL WELL  GAS WELL  OTHER Water Injection Well

Name of Operator

Texaco producing Inc.

Address of Operator

P. O. Box 728, Hobbs, NM 88240

Location #: 000

UNIT LETTER A 880 FEET FROM THE North LINE AND 330 FEET FROM  
THE East LINE. SECTION 36 TOWNSHIP 16S RANGE 36E NEPM.

15. Elevation (Show whether DF, RT, CR, etc.)

3849' DF

9. Well No.

13

10. Field and Pool, or Wildcat

Lovington Paddock

12. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

FORM 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Repair Casing Leak <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>			

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE EX. 103.

- 1) 04/14/86 MIRU. Install BOP. Pull tbg. and packer.
- 2) Clean out to TD at 6279' w/4 3/4" bit.
- 3) With RBP and packer. Locate casing leak between 2078' and 2142'. Est. rate of 1 BPM @ 750#.
- 4) TDH w/RBP and packer. Set CIRP @ 5350' and cement retainer @ 2016'.
- 5) Squeeze casing leak w/200 sxs Class H w/2% CaCl. WOC.
- 6) Drill out cement and retainer. Test casing 5350-surface to 500# OK.
- 7) Drill out CIRP.
- 8) GIH w/Howco R-3 pkr on 199 Jts 2 3/8" 1 PC tbg. Set @ 6087.
- 9) Circ. backside w/inhibited water. Test backside to 500# for 30 min. OK.
- 0) Place on injection at 180 BUPD @ 1500#. 04/24/86.

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

*J. L. Pennington*

District Admin. Supervisor

Date 05/13/86

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF LEADS RECEIVED	
CITY SECTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
SA. State Oil & Gas Lease No.
B-7896

SUNDY NOTICES AND REPORTS C. WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER - Water Injection Well	7. Unit Agreement Name Lovington Paddock Unit
2. Name of Operator TEXACO Producing Inc.	8. Farm or Lease Name -
3. Address of Operator P.O. Box 728, Hobbs, New Mexico 88240	9. Well No. 36
4. Location of well UNIT LETTER <u>O</u> 660 FEET FROM THE <u>South</u> LINE AND <u>2160</u> FEET FROM THE <u>East</u> LINE, SECTION <u>31</u> TOWNSHIP <u>16S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat Lovington Paddock
15. Elevation (Show whether DF, RT, GR, etc.) 3816' DF	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REWELD 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Repair casing leak</u> <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Describe Initiated or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FILE 103.

1. 04-24-86 MIRU. Install BOP. Pull tubing and packer.
2. Tag TD with 4 3/4" bit at 6245'. POH.
3. With RBP and packer, locate casing leak within 15' of surface.
4. Pick up 5 1/2" casing with spear. Inspect casing and slips, okay. Run casing inspection log 2000'-surface. No holes.
5. ND BOP and wellhead. Install 5 1/2" lift sub. Pull casing slips. Make up 5 1/2" casing 1 1/2-3/4 turn.
6. Test casing - okay.
7. Set tension packer at 5980'. Acidize openhole 6050'-6245' with 2000 gallons 20% NEFE with 2 drums Inflo-40. Flush with 50 BFW.
8. Flow back load.
9. TIH with Howco R-4 packer to 5993' on 2 3/8" IPC tubing.
10. RD. Place on injection.
11. Injecting 170 BWPD at 1800# 05-05-86.

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

*Att/Bronzing*

SIGNED Att/Bronzing TITLE Dist. Adm. Supvr.

DATE 05-15-86

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

NO. OF COPIES RECEIVED	1
CITY & STATE	1
SANTA FE	1
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO ACCEPTE OR PLACED BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR S.I.- PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection Well	7. Unit Agreement Name Lovington Paddock Unit
2. Name of Operator TEXACO Producing Inc.	8. Farm or Lease Name
3. Address of Operator P.O. Box 728, Hobbs, New Mexico, 88240	9. Well No. 53
4. Location of well UNIT LETTER A . 330 FEET FROM THE North LINE AND 840 FEET FROM	10. Field and Post, or Wildcat Lovington Paddock
THE East LINE, SECTION 6 TOWNSHIP 17S RANGE 37E MMPLM.	
15. Elevation (Show whether SF, RT, GR, etc.) 3815' DF	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REWELL 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"/>	CHARGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <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 _____		OTHER _____ Repair casing leak <input checked="" type="checkbox"/>	

17. Describe Initiated or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FILE 103.

1. 04-29-86 MIRU. Install BOP. Pull tubing and packer. TIH with 4 3/4" bit.
2. TIH with RBP and packer. Could not locate a casing leak. TOH.
3. TIH with Howco R-4 apcker on 2 3/8" IPC tubing. Set packer at 6094'.
4. Test backside to 640# for 15 minutes - okay. R.D.
5. Place on injection.
6. 05-05-86 Injecting 270 BWPD at 1900#.

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

SIGNED M. Brumley

TITLE Dist. Adm. Supvr.

DATE 05-15-86

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-77

NAME OF EQUIPMENT REQUESTED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

SA. Indicate Type of Lease

State

Fed

SB. State Oil & Gas Lease No.

SUNDY 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 TO DRILL" FORM C-101 FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

NAME OF OPERATOR

TEXACO Inc.

ADDRESS OF OPERATOR

P. O. Box 728, Hobbs, New Mexico 88240

LOCATION OF WELL

UNIT LETTER 0 FEET FROM THE 660 South LINE AND 2180 FEET FROM

THE East LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
3565' (DF)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
M. B. Weir B

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT  
See Below

11. COUNTY  
Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

ALTERING CASING

TEMPORARILY ABANDON

REMEDIAL WORK

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

CASING TEST AND CEMENT JOBS

OTHER

OTHER

Repair Casing Leak

7. 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.

10. FIELD AND POOL: SKAGGS GLORIETA, SKAGGS DRINKARD, WEIR BLINEBRY

- RIGGED UP. TEST BLINEBRY STRING CIBP SET @ 5600'. TESTED OK.
- CEMENT SQUEEZE BLINEBRY STRING CASING LEAK W/100 SX CLASS H CEMENT CONTAINING .6% HALAD-9 AND .4% CRF-2 PER SX. WOC. DOC.
- TESTED BLINEBRY STRING TO 1000# FOR 30 MINUTES, 2:00-2:30 PM, 4-15-84. TESTED OK.
- KILL DRINKARD ZONE. PULL PKR. DRILL OUT CIBP SET IN DRINKARD STRING @ 5600'.
- SPOT 40' CEMENT ON CIBP @ 5600' IN BLINEBRY STRING AND SET CIBP @ 5120' AND SPOT 40' CEMENT ON PLUG. SHUT-IN BLINEBRY STRING, 4-24-84.
- INSTALL PRODUCTION EQUIPMENT IN DRINKARD STRING. TEST AND PLACE ON PRODUCTION.

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

*[Signature]*

TITLE Asst Dist Mar

DATE 5-3-84

APPROVED BY MERRY SEXTON

DISABILITY SUPERVISOR

TITLE

DATE

MAY 7 1984

## STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT

No. of Leaseholders	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL #

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease

State Fee 

3. State Oil &amp; Gas Lease No.

B-1431

## SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPLY OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)1. OIL WELL  GAS WELL  OTHER Water Injection

7. Unit Agreement Name

Rhodes Yates Unit

2. Name of Operator

TEXACO Inc.

8. Farm or Lease Name

Rhodes Yates Unit

3. Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

9. Well No.

7

4. Location of Well

UNIT LETTER F 1650 FEET FROM THE North LINE AND 2310 FEET FROM

10. Field and Pool, or Wildcat

THE West LINE, SECTION 27 TOWNSHIP 26-S RANGE 37-E NWPM.

Rhodes Yates

15. Elevation (Show whether DF, RT, GR, etc.)  
2990' (DF)

12. County

Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON COMMENCE DRILLING OPS. PLUG AND ABANDONMENT PULL OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB 

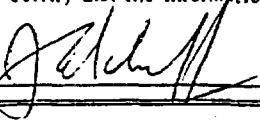
OTHER \_\_\_\_\_

OTHER Repair Water Flow 

17. 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. Rigged up. Install BOP. Pull tubing & pkr.
2. Set RBP @ 2972'. Test 5 1/2" Csg. Locate leak between 742' - 762'.
3. Set cement retainer @ 731'. Cement 5 1/2". Csg leak w/300 Sx. Class 'H' cement containing 7.8# Salt, .3% Halad-4 & 5# Gilsonite/Sx. Cement circulated. Squeeze w/add'l 150 Sx. Class 'H' Cement. WOC. DOC. Tested OK.
4. Install injection equipment. Test & return to injection.

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

SIGNED 

TITLE Asst. Dist. Mgr.

DATE 6-11-81

Carter, Jerry G.  
Jerry Carter

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_

Dale L. Smith

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

C CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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OPERATOR	

5a. Indicate Type of Lease

State

Frac

5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO GELPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL

OTHER:

Water Injection

Name of Operator

TEXACO INC.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER B FEET FROM THE 660 North LINE AND 1980 FEET FROM

THE East LINE, SECTION 4 TOWNSHIP 17-S RANGE 36-E MMPC.

15. Elevation (Show whether DF, RT, GR, etc.)

3899' (GR)

10. Field and Pool, c. a. d. or  
Lovington San Andres West

11. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING LINES

TEMPORARILY ABANDON

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CHANGE PLANS

CASING TEST AND CEMENT JOB

OTHER Repair Casing Leak

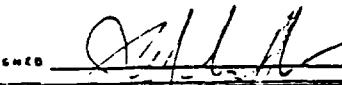
OTHER

7. 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. Rig up. Install BOP. Pull tubing & packer.
2. Set CIBP @ 4650'.
3. Isolate casing leak utilizing packer, POH.
4. Go in hole with cement retainer and workstring, set retainer above casing leak and test.
5. Circulate class 'H' cement with 2% Calcium Chloride (1.18 cu.ft./sk, 15.6 ppg, est 675 sx).
6. Squeeze with 125 sx class 'H' with 0.5% Halad 9, follow with 75 sx class 'H' with 2% Calcium Chloride (1.18 cu.ft./sk, 15.6 ppg). Pull out of retainer, reverse out excess cement.
7. Drill out cement retainer and cement test casing.
8. Drill out CIBP, clean out to TD.
9. Run 2 3/8" plastic coated tubing w/pkr & set @ 4650'. Load Annulus w/inhibited water. Return to Injection.

THE COMMISSIONER MUST BE NOTIFIED  
BY PHONE PRIOR TO COMMENCING WORK

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



TITLE Asst. Dist. Mgr.

DATE 7-13-84

PROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

91

NEW MEXICO

LEA

## WELL FILE

WEST LOVINGTON UNIT WELL NO. 6, (TX WI 28.40646%)  
(EXP)

TD: 5100'

CSG: 5-1/2" SET @ 4740'

RRW: REPR CSG LEAK

W/O COMMENCED: 7-14-84

EST. NO. 4-3720, EST. DAYS: 10, COMM - 3

EST. CASH: \$39,600, COMMITTED: \$11,500

7-19/25-84

SET PKR @ 4590'. SHOWED 1000# PRESS ON TBG. INDICATED BAD PIPE  
BELOW PKR. LOAD BKSIDE. PRESS TO 500#. HELD 30 MINS. (WITNESSED  
BY N.M.O.C.D.) REL PKR. POH W/PKR @ WS. GIH W/5-1/2" CIBP SET @  
4500'. CAP W/40' CMT. GIH W/5-1/2" PKR ON WS TO 4410'. SET PKR.  
TSTD CIBP TO 500#. HELD. REL PKR. CIRC HLE W/INHIB WTR. POH LD  
PKR & WS. FILLED REMDR HLE W/INHIB WTR. LAND 1 JT TBG IN WH &  
2-3/8" MASTER VALVE. RD. CHG STATUS FR W/O TO SI-OIL EFFECTIVE  
7-19-84. FINAL REPORT. INT.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

*WELL FILE* SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-7

5a. Indicate Type of Lease

State

Fed

5b. State Oil & Gas Lease No.

B-9106

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER - Water Injection

Name of Operator

TEXACO Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER J FEET FROM THE 2970 North LINE AND 2310 FEET FROM  
THE East LINE, SECTION 8 TOWNSHIP 17-S RANGE 36-E NE/4 PM.

7. Unit Agreement Name

West Lovington Unit

8. Former Lease Name

West Lovington Unit

9. Well No.

62

10. Field and Pool, or Wildcat  
Lovington Can  
andres West

11. County

Lea

15. Elevation (Show whether DF, RT, GR, etc.)  
3900' (GR)

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
CHANGE PLANS

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOBS   
OTHER Repair Water Flow

ALTERING CASING   
PLUG AND ABANDONMENT

17. 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. RIGGED UP. FULL TUBING.
2. SET RBP @ 3986' AND SPOT 2 SX SAND ON PLUG.
3. SET CEMENT RETAINER @ 1940'.
4. CEMENT CASING LEAK @ 2050' W/ 100 SX CLASS H CEMENT CONTAINING 3% CACL.WOC. DOC.
5. TESTED TO 800# FOR 30 MINUTES, 9:00-9:30 AM, 12-13-83. TESTED OK.
6. PULL RBP. RUN 2 3/8" PLASTIC COATED TUBING W/PACKER AND SET @ 4640'.
7. RETURN WELL TO WATER INJECTION.

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

*W.H. SEXTON*

TITLE

Asst Dist Mgr.

DATE 12-22-83

ORIGINAL DRAFTED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

TITLE

DEC 27 1983

DATE

## ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-71

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WELL FILE

5a. Indicate Type of Lease

State Fee 

5. State Oil &amp; Gas Lease No.

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)OIL WELL  GAS WELL 

OTHER

## Water Injection

Name of Operator

TEXACO Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

K 1980

South

1980

UNIT LETTER

K

FEET FROM THE

LINE AND

FEET FROM

West

13

20-S

37-E

THE

LINE, SECTION

TOWNSHIP

RANGE

NWPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3557' (DF)

10. Field and Pool, or Unit

Skaggs Grayburg

7. Unit Agreement Name

Skaggs Grayburg Unit

8. Form of Lease Name

Skaggs Grayburg Unit

9. Well No.

22

10. Field and Pool, or Unit

Skaggs Grayburg

12. County

Lea

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

IF FORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON COMMENCE DRILLING OPS. PLUG AND ABANDONMENT ALTER OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB OTHER \_\_\_\_\_ OTHER Repair Water Flow 

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. RIGGED UP. INSTALL BOP. PULL INJECTION TUBING AND PKR.
2. SET CIBP @ 3700' AND SPOT 40' CEMENT ON PLUG. TESTED TO 500# (WITNESSED BY NMOCD REPRESENTATIVE). TESTED OK.
3. HANG ONE JOINT TUBING IN HOLE. WELL COMPLETED SHUT-IN WATER INJECTION, 7-26-84.

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



Asst Dist Mgr

TITLE

DATE 8-2-84

OVERED BY

TITLE

DATE

DITIONS OF APPROVAL, IF ANY

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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WELL FILE

WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-1

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPLIN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER-	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.			8. Farm or Lease Name C. H. Weir B
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 83240			9. Well No. 2
4. Location of Well UNIT LETTER A FEET FROM THE North LINE AND 660 FEET FROM			10. Field and Pool or Wildcat Weir Blinberry East Skaggs Drinhard
THE Past LINE, SECTION 11 TOWNSHIP 20-E RANGE 37-E NMPM.			
15. Elevation (Show whether DF, RT, CR, etc.) 3589' (DF)			12. County Lea

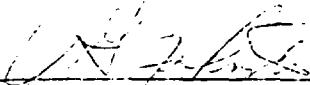
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUS 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 OPS. <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 <input type="checkbox"/>	REPAIR WATER FLOW <input type="checkbox"/>
OTHER _____			

17. 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. PULLED OUT WELL WORKS AND WIND TUBING FROM BBLT AND TBC.
2. CLEAN OUT TO 6022'.
3. SET PKR @ 6011'
4. SHOTCORATE 5 1/2" CSG W/2-3SPF @ 1500'
5. SET CEMENT RETAINER @ 1411'. CEMENT PERFORATIONS @ 1509' W/500 SX CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. SQUEEZE W/ ADDL 700 SX CLASS H CEMENT AND 2000 GALS FLOCHEX. WOC. DOC. DID NOT HOLD.
6. SET CEMENT RETAINER @ 1473'. CEMENT W/ 1/400 SX CLASS H CEMENT CONTAINING 3% CACL AND 4000 GALS FLOCHEX. FOLLOW W/100 SX CLASS H CEMENT CONTAINING 3% CACL. WOC. DOC.
7. TESTED CSG TO 1000# FOR 30 MINUTES, 3:00-3:30 PM, 11-7-83. TESTED OK.
8. PULL RBP. SET PKR @ 5596'. TREAT W/3000 GALS 15% NEFE ACID IN 2-STAGES USING 1000 GALS HYDEL-40 BLK. FLUSHED.
9. INSTALL PUMPING EQUIPMENT. TEST AND RETURN TO PRODUCTION.

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

SIGNED 

Asst Dist Mgr

12-19-83

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

DEC 22 1983

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

66	000-00000000
CITY & SECTION	1
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

5a. Indicate Type of Lease  
State  Fee   
5b. State Oil & Gas Lease No.  
B-2330

SUNDY 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 S.I.T. PROPOSALS.)

OIL WELL  GAS WELL  OTHER

Injection Well

6. Name of Operator

Texaco Producing Inc.

Address of Operator

P. O. Box 728, Hobbs, NM 88240

Location of well

UNIT LETTER A 660 FEET FROM THE North LINE AND 660 FEET FROM

THE East LINE, SECTION 27 TOWNSHIP 19S RANGE 37E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3622' KB

7. Unit Agreement Name

East Eumont Unit

8. Farm or Lease Name

9. Well No.

66

10. Field and Pool, or Wildcat

Eumont Yates Seven  
Rivers Queen

11. County

Lea

6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

TEMPORARILY ABANDON

CHARGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

PULL OR ALTER CASING

CASING TEST AND CEMENT JOB

OTHER

OTHER Test csg. and acidize perfs

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

TPI  
East Eumont Unit #66  
C-103

- 1) Install BOP. Attempt to release tension pkr. @ 3772'. TOH w/2 3/8" IPC tbg. and left pkr. downhole.
- 2) TIH w/bit and mill on pkr. Push to 3881'. TOH.
- 3) TIH w/RBP and pkr. and set RBP @ 3768'. Located 5½" csg. leak in csg head. Test csg. @ 4-3761 to 1500# for 30 min., held ok.
- 4) Install new 8-5/8" - 5 1/2" wellhead. Tested to 2000# for 30 min., held ok. TIH w/ retrieving tool and TOH w/ RBP.
- 5) TIH w/pkr. and set @ 3742'. Acidized 5½" csg. perfs w/1000 gal 15% acid.
- 6) TOH w/pkr. TIH w/Lok-set nickle plated pkr. on 2 3/8" IPC tbg. Set @ 3755'. RDPU.
- 7) Before workover: inj. water @ 10 BWPD, 1500#. After workover: 300 BWPD @ 1600#.

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

171/Browning

TITLE District Admin. Supervisor

DATE 03/10/86

PROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY & MINERALS DEPARTMENT

SD. OF EXP. RECEIVED	
S.D.T.P. SECTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

'L CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

SUNDAY NOTICES AND REPORTS C. WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" IF FORM C-1011 FOR S.I.L. PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: <u>Injection Well</u>	7. Unit Agreement Name <u>East Eumont Unit</u>
2. Name of Operator <u>Texaco Producing Inc.</u>	8. Former Lease Name
3. Address of Operator <u>P. O. Box 728, Hobbs, NM 88240</u>	9. Well No. <u>58</u>
4. Location #: UNIT LETTER <u>M</u> FEET FROM THE <u>S</u> LINE AND <u>660</u> FEET FROM THE <u>W</u> LINE, SECTION <u>22</u> TOWNSHIP <u>19S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>Eumont Yates-7 Rivers Queen</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3643' DF</u>	12. County <u>Lea</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REVERSAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> OTHER <u>Repair casing leak</u> <input type="checkbox"/>
	ALTERING-CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

East Eumont Unit #58  
C-103

- 1) MIRUPU. Install BOP. TOH W/tbg. and pkr.
- 2) TIH w/RBP and pkr. and set plug @ 3729'. Set pkr @ 3380' and tested squeezed perfs @ 3403-3606' to 750#, lost 100# in 30 min. Pressured csg. @ 3380' to surface to 750#, held OK. TOH w.pkr.
- 3) TIH w/2 7/8" workstring, By Halliburton, spot 100 sxs class "H" cmt. w/0.3% Halad-4 @ 3047-3639'. Pressured csg to 1000#, formation took 24 sxs. Held 1000# for 1.5 hrs. WOC. SITP 1000#.
- 4) TIH w/bit and tagged cmt. @ 3029'. Drilled cmt. to 3635', then ran bit to 3700'. Pressure tested csg to 300#, built up to 750# in 1 hr. TOH w/bit. TIH w/pkr. to 3351' and pressured csg. to 2000#, lost 100# in 15 min. Perfs would not take fluid, TOH.
- 5) TIH w/injection pkr. and 2 3/8" IPC tbg. Set pkr. @ 3365' w/tailpipe to 3644'. Pressure test backside to 500# for 30 min., held OK.
- 6) RDPU. Commence water injection.

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

W. B. Eader

TITLE District Oper. Manager

DATE 02/19/86

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

CD. OR EXP. TO RECEIVED	
C. STA. DIVISION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease

State

Fee

3. State Oil & Gas Lease No.

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO STEP OUT OF A WELL INTO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL  GAS WELL  OTHER Injection Well

7. Unit Agreement Name

2. Name of Operator

Texaco Producing Inc.

8. Farm or Lease Name

East Eumont Unit

3. Address of Operator

P.O. Box 728, Hobbs, NM 88240

9. Well No.

55

4. Location of well

UNIT LETTER I . 1971 FEET FROM THE South LINE AND 330 FEET FROM

10. Field and Pool, or Wildcat  
Eumont Yates  
Seven Rivers Queen

THE East LINE, SECTION 21 TOWNSHIP 19S RANGE 37E NWPM.

11. County

Lea

15. Elevation (Show whether DF, RT, GR, etc.)

3625' DF

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REPAIRS & WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING

PLUG AND ABANDON

REMEDIAL WORK

ALTERING CASING

CHANGE PLANS

COMMENCE DRILLING OPS.

PLUG AND ABANDONMENT

CASING TEST AND CEMENT JOB

OTHER Repair casing leak & acidize perfs

OTHER

17. Describe Planned or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

- 1) MIRUPU. Install BOP. TOH w/tbg. and pkr.
- 2) TIH w/bit and tag @ PBTD 3898'. TOH.
- 3) Run RBP and pkr. Set plug @ 3672'. With pkr. found csg. leak @ 731-63' and 921-51'.
- 4) Attempted to pump 273 gal 15% acid, but would take only 1/16 BPM. Perf 2 holes @ 935'.
- 5) By Halliburton, pumped 500 sxs class "H" w/2% CaCl<sub>2</sub>, @ 4 BPM, 1000#. Displace to 681'. WOC.
- 6) TIH w/bit, tag @ 650', and drill to 965'. Circ. clean. Ran CRC temp. surver, TOC @ 910'. Perf 2 holes @ 740'. Could not circulate.
- 7) Spotted 250 gal 15% acid @ 740'. Squeezed perfs @ 740' w/150 sxs class "H" cmt. w/2% CaCl<sub>2</sub>. WOC.
- 8) TIH w/bit and tagged cmt. @ 530'. Drilled cmt. to 735'. Tested squeeze holes to 500#, lost 120# in 30 mins. Pressure tested perfs @ 935' to 500#, lost 150# in 30 mins. Perfs @ 740' lost 250# in 15 min. Tested csg. @ 732' to surface to 500#, held OK.
- 9) Spotted 60 sxs cmt @ 943'-4-1'. Pressured to 1000# for 4 hrs., perfs took 12 sxs. SITP 1000#.
- 10) Drilled cmt @ 432-755'. Tested perfs to 500#, lost 80# in 30 mins.
- 11) Drilled cmt. to 940' and fell free. Tested to 300#, lost 110# in 30 min.
- 12) With workstring, spotted 60 sxs. Class "H" cmt. @ 943-393'. TOH. WOC.
- 13) Drill out cmt. @ 533-960'. Circ. clean. Tested perfs @ 740' 59 500#, lost 20# in 30 mins. Tested perfs @ 935' to 320#, lost 60# in 30 min. TOH w/RBP.
- 14) TIH w/inj. pkr. and set @ 3734'. Treated Penrose perfs @ 3829-39 w/1000 gal 15% acid.

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

SIGNED JW Browning TITLE District Admin. Supervisor DATE 07/18/86

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

SI 1 hr. Flow back 50 BLW. RDPU.

- 15) Prior to work: Inj. 37 BWPD @ 1900#, Now: 217 BWPD @ 1900#.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

O CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-73

OIL WELL	<input type="checkbox"/>
GAS WELL	<input type="checkbox"/>
SANTA FE	<input type="checkbox"/>
FILE	<input type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
OPERATOR	<input type="checkbox"/>

SUNDY NOTICES AND REPORTS ON WELLS

(See reverse side of this form for proposals to drill or to deepen or to re-drill to a different reservoir.  
Use "APPLICATION FOR PERMIT" - Form C-101 for all proposals.)

OIL WELL  GAS WELL  OTHER **Injection Well**

Name of Operator

Texaco Producing Inc.

Address of Operator

P. O. Box 728, Hobbs, NM 88240

Location of well

UNIT LETTER **C** 660 FEET FROM THE **North** LINE AND **1980** FEET FROM

THE **West** LINE, SECTION **34** TOWNSHIP **195** RANGE **37E** R.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)

**3576' DF**

7. Unit Agreement Name

**East Eumont Unit**

8. Farm or Lease Name

9. Well No.

**83**

10. Field and Pool, or W.H.D.C.

**Eumont Y-7R-Q**

12. County

**Lea**

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

1. FORM REVISED OR WORK   
2. TEMPORARILY ABANDON   
3. MODIFY OR ALTER CASING   
4. OTHER

1. PLUG AND ABANDON   
2. CHANGE PLANS   
3. REMEDIAL WORK   
4. COMMENCE DRILLING OPS.   
5. Casing Test and Cement Job   
6. OTHER

1. ALTERING CASING   
2. PLUG AND ABANDONMENT   
3. OTHER

Describe Estimated or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FILE 1503.

- 1) MIRUPU. TOH w/pkr.
- 2) TIH w/RBP and pkr. Set plug @ 3570'. Located csg. leak @ 705' and 736'.
- 3) Ran 5½" pkr and set @ 397'. Squeezed holes w/300 sxs class "C" cement w/calcium chloride. Displaced to 600'. Circulate 25 sxs out bradenhead. WOC
- 4) TIH w/bit, tagged cmt. @ 589'. Drilled to 800', tested to 500#, held ok. TOH w/bit.
- 5) Pulled RBP @ 3570'. TIH w/bit and cleaned out @ 3765-3815'. TOH.
- 6) Ran Model "R" pkr to 3656'. Treated perfs @ 3749-3799' w/2700 gal. 15% NEFE w/55 gal Checker-Sol and 100 balls. TOH w/pkr.
- 7) RIH w/2 3/8" IPC tbq. and Baker "AD" pkr. Set pkr. @ 3640'. Pkr. leaked.
- 8) Change out pkr. @ 3640'. Tested ok. RDPU.

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

*W. B. Lehr*

TITLE District Oper. Manager

DATE 01/27/86

OVER BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

APPROVAL, IF ANY:

OPERATOR'S COPY

WELL FILE  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other Water Injection

2. NAME OF OPERATOR  
TEXACO Inc.

3. ADDRESS OF OPERATOR

P.O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 2310' FNL & 1750' FWL  
AT TOP PROD. INTERVAL: Unit Letter "F"  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input checked="" type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other)		

SUBSEQUENT REPORT OF:

- |   |  |
|---|--|
| 5. LEASE<br>NM-033775   | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                     |
| 7. UNIT AGREEMENT NAME<br>North Benson Queen Unit                           | 8. FARM OR LEASE NAME<br>North Benson Queen Unit         |
| 9. WELL NO.<br>5  | 10. FIELD OR WILDCAT NAME<br>North Benson Queen Grayburg |
| 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>Sec. 27, T-18-S, R-30-E | 12. COUNTY OR PARISH<br>Eddy                             |
| 13. STATE<br>New Mexico   | 14. API NO.  |
| 15. ELEVATIONS (SHOW DF, KDB, AND WD)<br>3532' (GR)                         |  |

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

1. Rigged up. Install BOP. Pull tubing.
2. Spot sand from 2809'-3111'.
3. Ran 2655' 2 7/8" tubing.
4. Cemented W/300 sx. Class H Cement containing 2% CaCl. Cement did not circulate. Job complete 12:00 Noon, 1-20-84.
5. Bond log revealed cement Bond from 1500'-1010' and 550'-460'.
6. Squeeze 4 1/2" x 2 7/8" & 7 5/8" x 4 1/2" casing Annulus W/200 sx. Class H Cement containing 4% CaCl. Cement did not circulate. Job complete 3:00 PM, 1-24-84.
7. Re-Squeeze 4 1/2" x 2 7/8" & 7 5/8" x 4 1/2" Casing Annulus W/75 sx. Class H Cement (50-50 Calseal). Cement circulated. WOC. DOC. Wash sand.
8. Tested to 600# for 30 minutes, 2:30-3:00 PM, 1-30-84. Tested OK.
9. Ran 2 1/16" OD plastic coated tubing W/pkr. & set @ 2642'. Load Annulus W/inhibited
10. Well classified shut-In-Water Injection Well, 1-30-84. Water.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED G.W.8 TITLE Asst. Dist. Mgr. DATE 2-1-84

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY G.W.8 TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL MAY 1 1984

Carlsbad, NEW MEXICO \*See Instructions on Reverse Side

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

JIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

WELL FILE

5a. Indicate Type of Lease
State <input type="checkbox"/>
Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

SUNDY 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER -	7. Unit Agreement Name -	
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name M. B. Weir B	
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 8	
4. Location of Well UNIT LETTER N FEET FROM THE South LINE AND 1650 FEET FROM	10. Field and Pool, or Wildcat Skaggs Glorieta	
THE West LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E MM.P.M.		
15. Elevation (Show whether DF, RT, CR, etc.) 3581' (DF)	12. County Lea	
16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input type="checkbox"/> Repair Water Flow <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rigged up. Pull rods and pump. Install BOP. Pull tubing.
2. Set CIBP @ 4800' and spot 40' cement on plug.
3. Perforate 2 7/8" casing W/2-JS @ 1488'.
4. Cement to surface W/450 sx. class H Cement, containing 2% CACL. Squeeze W/addl. 4000 sx. Class H Cement. WOC. DOC.
5. Tested 2 7/8" Casing to 600# for 30 minutes, 1:15-1:45 PM, 8-11-83. Tested OK.
6. Install pumping equipment. Tested and returned to production.

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

SIGNED  TITLE Asst. Dist. Mgr.

DATE 8-19-83

AUG 22 1983

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT SUPERVISOR

TITLE

TITLE

CONDITIONS OF APPROVAL, IF ANY:

WELL FILE

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

OPERATOR'S COPY

SUNDY 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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
TEXACO Inc.

3. ADDRESS OF OPERATOR  
P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 660' FNL & 2310' FEL  
AT TOP PROD. INTERVAL: (Unit Letter B)  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: Subsequent Report Of:

TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) <u>Repair Casing Leak</u>		

5. LEASE  
LC-062300

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME  
Cotton Draw Unit

8. FARM OR LEASE NAME  
Cotton Draw Unit

9. WELL NO.  
51

10. FIELD OR WILDCAT NAME  
Paduca Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 28, T-25-S, R-32-E

12. COUNTY OR PARISH  
Lea

13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3397' (DF)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

1. RIGGED UP. INSTALL BOP.
2. TEST CASING FOR LEAKS.
3. SET CIBP @ 552'. CEMENT CSG LEAKS FROM 338-550' W/155 SX CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. WOC. DOC. TESTED CSG TO 500# FOR 30 MINUTES, 2:15 - 2:45 PM, 10-23-84. TESTED OK. PUSHED CIBP TO 4500'.
4. SET CEMENT RETAINER @ 3213'. SQUEEZE CSG 3420-3456' W/300 SX CLASS H CEMENT CONTAINING .5% D-19 ADDITIVE & 200 SX CLASS H CEMENT CONTAINING 2% CACL. WOC DOC. TEST. CSG LEAKED.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED W.B. Lueh Asst Dist Mgr TITLE \_\_\_\_\_ DATE 1-3-85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL IF ANY: None

5. SQUEEZE CASING LEAK 338-560' W/125 SX CLASS H CEMENT CONTAINING 2% CACL. WOC. DOC. TESTED CASING FROM SURFACE TO 3185' W/500#. TESTED OK.
6. TESTED CASING FROM SURFACE TO 4500' W/500# FOR 30 MINUTES, 9:30-10:00 AM, 11-2-84. TEST WITNESSED BY BLM REPRESENTATIVE.
7. PUSHED CIBP TO 4630'. DRILL PLUG AND CLEAN OUT TO 4710'.
8. SET PKR @ 4561'. ACIDIZE 4 1/2" CSG PERFS 4629-4670' W/500 GALS 15% NEFE ACID. FLUSH W.25 BBLS PRODUCED WATER.
9. INSTALL PUMPING EQUIPMENT. ON 24 HR POTENTIAL TEST ENDING 12-11-84, WELL PUMPPED 19 BO & 219 BW. PLACE ON PRODUCTION.

STAT

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
OPERATOR	

WELL FILE

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease

State Fee 

5. State Oil &amp; Gas Lease No.

B-10695

## SUNDY 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name <b>West Vacuum Unit</b>
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>West Vacuum Unit</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>50</b>
4. Location of Well UNIT LETTER <b>I</b> FEET FROM THE <b>North</b> LINE AND <b>410</b> FEET FROM THE <b>East</b> LINE, SECTION <b>3</b> TOWNSHIP <b>18-S</b> RANGE <b>34-E</b> NMPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>4022' (DF)</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:		
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
OTHER _____	OTHER _____	PLUG AND ABANDONMENT <input type="checkbox"/>
SUBSEQUENT REPORT OF: <b>Repair Water Flow</b>		

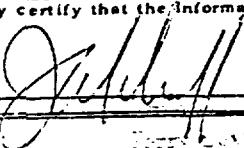
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. SEE RULE 1103.)

1. Rigged up. Pull rods, pump & tubing.
2. Set RBP @ 4000' & dump 20' Sand on plug.
3. Perforate 5 1/2" Csg W/2-JS @ 1725'. Set cement retainer @ 1675'.
4. Cement perfs @ 1725' W/500 Sx. Class "H" Cement containing 2% CaCl. Cement circulated. Squeezed W/add'l 60 Sx. Class "H" cement. WOC. DOC.
5. Install pumping equipment. Test & return to production.

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

TITLE Asst. Dist. Mgr.

DATE 10-5-81

SIGNED 

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

OCT 8 1981

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2038  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-81

8. Indicate Type of Lease  
State  Fee   
9. State Oil & Gas Lease No.  
**B-3936**

**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.)

1. OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- <b>Water Injection</b>	7. Unit Agreement Name <b>West Vacuum Unit</b>
2. Name of Operator <b>Texaco Inc.</b>		8. Farm or Lease Name <b>West Vacuum Unit</b>	
3. Address of Operator <b>P.O. Box 728 Hobbs, New Mexico 88240</b>		9. Well No. <b>40</b>	
4. Location of Well UNIT LETTER <b>C</b> . 660 FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>4</b> TOWNSHIP <b>18-S</b> RANGE <b>34-E</b> N.M.P.M.		10. Field and Ppt., or Wildcat <b>Vacuum Grayburg San Andres</b>	
11. Elevation (Show whether HF, RT, CR, etc.) <b>4062' (DF)</b>		12. County <b>Lea</b>	

13. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING

PLUG AND ABANDON   
REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CHANGE PLANS   
CASING TEST AND CEMENT JOB   
OTHER **Repair water flow**

ALTERING CASING   
PLUG AND ABANDONMENT

14. 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. Rigged up. Pull tubing & packer.
2. Set RBP @ 4000'.
3. Perforate  $5\frac{1}{2}$ " Csg w/2-JS @ 1675'.
4. Set cement retainer @ 1440'. Cement perfs @ 1675' w/500 sx, Class 'H' cement containing 2% CaCL. Cement circulated. Squeeze 60 sx Class 'H' cement. WOC. DOC. Tested Csg did not hold.
5. Set cement retainer @ 1567: Squeezed w/12 Bbls. Flochek. DOC & Junk. Tested to 500# for 30 minutes, 8:00-8:30 AM, 10-16-81.
6. Install injection equipment. Return to injection, 10-16-81.

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

SIGNED

TITLE **Asst. Dist. Mgr.**

DATE **10-29-81**

APPROVED BY

TITLE

DATE

APPROVAL IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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SA. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
49557

SUNDY 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. Unit Agreement Name West Lovington Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name West Lovington Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 27
4. Location of Well UNIT LETTER N 660 FEET FROM THE South LINE AND 1980 FEET FROM	10. Field and Pool, or Wildcat Lovington San Andres West
THE West LINE, SECTION 6 TOWNSHIP 17-S RANGE 36-E MM.P.M.	
15. Elevation (Show whether DF, RT, GR, etc.) 3926' (GR)	12. County Lea

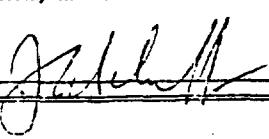
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
Repair Water Flow <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
	PLUG AND ABANDONMENT <input type="checkbox"/>
	CHANGE PLANS <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1. Rig up. Install BOP. Pull tubing & packer.
2. Set RBP @ 4600' & dump 2 Sx. Sand on plug.
3. Perforate 5 1/2" Csg W/2-JS @ 2036'.
4. Set cement retainer @ 1986'. Cement W/400 Sx. Class 'H' Cement & circulate. Squeeze W/add'l. 200 Sx. Class 'H' cement. WOC. DOC. Test.
5. Install injection equipment. Test & return to injection.

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

SIGNED 

TITLE Asst. Dist. Mgr.

DATE 9-29-81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE 9-29-81

## WELL FILE

NEW MEXICO

LBN

A

West Lovington 27  
 Unit  
 (EXP)  
 TX WI 28.40646  
 Est. #1-3673

Cir cmt b/wt pkr w/ ann  
 intermediate csg to  
 correct wtr flow as  
 required by the NMOCD.

MIRU Ralph Johnson rig 12-14-81. Instl'd BOP. Rel'd pkr. POH. Prep to run bit & C/O to TD.

12-11/17-81

Ran 4-3/4" bit & 10-3½" DC's on 2-3/8" tbg. Drld fill fr 5135-5175'. POH. Ran 5½" RBP & set @ 4525'. Tstd csg to 1200# for 30 min. Held. Spot 2 sx sd on RBP. POH. RU CRC WI service pf'd 5½" csg w/ 2 JS @ 2036'. JC @ 9:45 AM, 12-16-81. Ran Halli 5½" cmt ret & set @ 1946'. Brk cir up 5½ X 8-3/8 ann. P/40 BFW. Halli cmt'd 5½ & 8-5/8 w/425 sx Cl H w/2% CaCl, foll by 50 sx thixset w/3% CaCl. Max P-1450#. Holding @ 1450#. Pull out of ret & rev 7 sx cmt to pit. POH. SI. Prep to DOC.

No. of Days: Est: 9 Comm: 3 Cash: Est: \$43,000 Comm: \$19,000

12-18/24-81

Ran 4-3/4" bit & DCs. DOC 1943-1947 & rtnr 1947-1949'. DOC 1953-2040. Slight backflow @ 2 GPM. Press csg to 1300#. Leaked to 800# in 2 min. DOC 2040-2060. POH. Ran pkr & set @ 2000'. A/perfs @ 2036' w/500 gals 15% acid. AIR 2 BPM @ 1400#. POH. Ran cmt rtnr & set @ 1945'. Halli sqzd 5-1/2" csg perfs @ 2036 w/500 gals Flochek foll w/200 sx Thikset cmt w/3% CaCl. Max press 2000#. Rev 5 sx. Job comp 6 p.m. 12-18-81. POH. Ran 4-3/4" bit. DOC & cmt rtnr 1940-2045'. Ck for backflow. None. DOC 2045-2060. std 5-1/2" csg to 1300# 9:30 a.m. - 10:00 a.m. 12-22-81 - OK. POH. LD DCs. Ran rtvng tool to 4545'. Rel RBP. POH. Prep to run inj tbg.

No. of Days: Est: 9 Comm: 8 Cash: Est: \$43,000 Comm: \$44,000

12-25/31-81

Ran 5½" pkr w/on/off tool & profile nipple. Set pkr @ 4667'. Tstd csg to 1500# fr 2 PM-2:30 PM, 12-24-81. Held. Displ ann w/ corrosion Inhib wtr. Rebuild inj line. Resume inj @ 4 PM, 12-29-81.

No. of Days: Est: 9 Comm: 9 Cash: Est: \$43,000 Comm: \$50,000

1-1-32

On injection. 204 BWPD.

No. of Days: Est: 9 Comm: 9 Cash: Est: \$43,000 Comm: \$50,000

1-2/4-32

On inj 96 hrs. Inj'g 1-3-82 204 BWPD. 2375# tbg press. Inj into f-3/4" OH 4717-5175'. Lovington San Andres West Pool. FINAL REPORT.

No. of Days: Est: 9 Comm: 9 Cash: Est: \$43,000 Comm: \$50,000

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WELL FILE

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No.
B-1506

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER:	7. Unit Agreement Name <b>Central Vacuum Uni</b>
2. Name of Operator <b>Texaco Inc.</b>	8. Farm or Lease Name <b>Central Vacuum Uni</b>
3. Address of Operator <b>P.O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>36</b>
4. Location of Well UNIT LETTER <b>P</b> , LINE, SECTION <b>660</b> FEET FROM THE <b>South</b> LINE AND <b>660</b> FEET FROM THE <b>East</b> LINE, SECTION <b>25</b> TOWNSHIP <b>17-S</b> RANGE <b>34-E</b> NMMPM.	10. Field and Pool, or Wildcat <b>Vacuum Grayburg San Andres</b>
15. Elevation (Show whether DF, RT, CR, etc.) <b>3999' (GR)</b>	12. County <b>Tee</b>
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> FULL OR ALTER CASING <input type="checkbox"/> OTHER _____	
SUBSEQUENT REPORT OF: PLUG AND ABANDON <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <b>Repair Water Flow</b> <input type="checkbox"/>	

17. 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. Rigged up. Full Submersible pump & tubing. Install BOP.
2. Set RBP @ 3900' & dump sand on plug.
3. Perforate 5½" Csg. w/2-JS @ 1628'.
4. Set Cement retainer @ 1574'. Cement to Surface perfs. @ 1628' w/178 sx. Class 'C' Cement containing 2½ CaCl. Squeezed perfs. w/Addl. 172 sx. Class 'C' Cement containing 2½ CaCl. WOC. DOC.
5. Tested Csg. to 600# for 30 minutes, 2:00-2:30 PM, 6-30-82. Tested OK.
6. Install pumping equipment. Test & return to production.

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

SIGNED

TITLE **Asst. Dist. Mgr.**

DATE **8-2-82**

DIVISION SIGNED BY:

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

**8-2-82**

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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WELL FILE

OIL CONSERVATION DIV. C.

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-71

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-1306-1

SUNDY NOTICES AND REPORTS ON WELLS

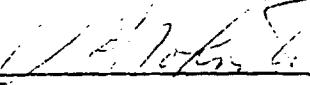
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT --" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. UNIT or Lease Name Vacuum Grayburg San Andres Unit		
2. Name of Operator TEXACO Inc.	8. Form of Lease Name Vacuum Grayburg San Andres Unit		
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 32		
4. Location of Well UNIT LETTER L LINE 30 FEET FROM THE West LINE AND 2630 FEET FROM	10. Field and Pool or Wildcat Vacuum Grayburg San Andres		
THE South LINE, SECTION 1 TOWNSHIP 18-S RANGE 34-E NMFM.			
15. Elevation (Show whether DF, RT, GR, etc.) 3999' (GR)	12. County Lea		
16. 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER Convert to Water Injection <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

1. Rigged up. Pull Reda Pump.
2. Perforate 5½" Csg W/2-JS @ 330'.
3. Squeeze perfs @ 330' W/275 sx. Class 'C' Cement Containing 2% CaCl. Follow W/ addl. 175 sx. Class 'C' Cement W/15% gel. & 75 sx. Class 'C' Cement 50-50 Calscal. Woc. Tested to 600# for 30 minutes, 6:00-6:30 AM, 9-22-78. Tested OK.
4. Ran 2 3/8" OD plastic coated tubing W/pkr. & set @ 4250'. Load Annulus W/ inhibited water.
5. Well Converted to Water Injection 9-27-82.

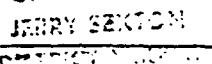
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED  TITLE Asst. Dist. Mgr.

DATE 12-1-82

ORIGINAL SIGNED BY

JERRY SEXTON

APPROVED BY  TITLE

DATE

IN CASE OF APPROVAL IF ANY:

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OPERATOR	

# OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-82

Sa. In Lieu Type of Lease

State

Fees

5. State Oil & Gas Lease No.

P-3936

## SUNDY 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.)

1. OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	Water Injection Well	7. Unit Agreement Name West Vacuum Unit
2. Name of Operator Texaco Inc.				8. Farm or Lease Name West Vacuum Unit
3. Address of Operator P.O. Box 728, Hobbs, New Mexico 88240				9. Well No. 44
4. Location of Well UNIT LETTER <u>C</u> , 669 FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM				10. Field and Pool, or Without Vacuum Grayburg San Andres
THE <u>West</u> LINE, SECTION <u>3</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> N.M.P.M.				11. County Lea
15. Elevation (Show whether DF, RT, GR, etc.) <u>4041'</u> (DF)				12. Subsequent Report of:
				PERFORM REMEDIAL WORK <input type="checkbox"/>
				PLUG AND ABANDON <input type="checkbox"/>
				REMEDIAL WORK <input type="checkbox"/>
				COMMENCE DRILLING OPS. <input type="checkbox"/>
				CASING TEST AND CEMENT JOBS <input type="checkbox"/>
				ALTERING CASING <input type="checkbox"/>
				PLUG AND ABANDONMENT <input type="checkbox"/>
				CHANGE PLANS <input type="checkbox"/>
				OTHER <u>Repair Water Flow</u> <input type="checkbox"/>
				OTHER <input type="checkbox"/>

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

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER

PLUG AND ABANDON   
CHANGE PLANS   
OTHER

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOBS   
OTHER

ALTERING CASING   
PLUG AND ABANDONMENT   
OTHER

17. 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. Pull tubing & pkr.
2. Set RBP @ 3950' & spot sand on plug.
3. Set cement retainer @ 1582'.
4. Squeeze casing leak @ 1670' w/350 sx. Class 'C' Cement, 2% CaCl & 1000 gals flochek in 3-stages. WOC. DOC.
5. Tested 5½" Csg. to 600#, 4:00-4:30 PM, 6-14-82. Tested OK.
6. Ran 2-3/8" OD plastic Coated tubing w/packer & set @ 4101'. Loaded Annulus w/inhibited water.
7. Return to injection, 6-15-82.

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

SIGNED J. H. H.

TITLE Asst. Dist. Manager

DATE 6-21-82

ORIGINAL COPY

JERRY ECKERT

TITLE

DATE

APPROVED BY \_\_\_\_\_

JERRY ECKERT

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

SO. 103 - Type of Lease

State 

Reo

S. State Oil &amp; Gas Lease No.

P-1713

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO FILL OR TO DEFEND OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)1.  OIL WELL  GAS WELL  OTHER

2. Name of Operator

Texaco Inc.

3. Address of Operator

P.O. Box 728, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER F 1980 FEET FROM THE North LINE AND 1980 FEET FROMTHE West LINE, SECTION 31 TOWNSHIP 17-S RANGE 35-E NMPLM.

15. Elevation (Show whether DF, RT, GR, etc.)

3980' (GR)

12. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF

PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING PLUG AND ABANDON CHANGE PLANS 

REMEDIAL WORK

COMMENCE DRILLING OPS. CASING TEST AND CEMENT JOB OTHER 

ALTERING CASING

PLUG AND ABANDONMENT

Repair Water Flow

CUTTER 

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any work) SEE RULE 1503.

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3960' & spot 20' Sand on plug. Test casing. Unable to run Radio Active Survey.
3. Perforate 7" Csg. w/2-JS @ 1500'. Cement squeeze perfs. @ 1500' w/500 Sx. Class 'H' Cement containing 2% CaCl. Run Temperature Survey. Top of Cement @ 470'. WOC. DOC. Test reveals Water Flow.
4. Set cement retainer @ 1411'. Cement squeeze 7" Csg. perfs. @ 1500' w/500 Sx. Class 'C' Cement containing 2% CaCl & 2000 gals. Flochek. Run Temperature survey. Top of Cement @ 300'. WOC. DOC. Test csg. to 750' for 30 minutes, 3:15-3:45 PM, 5-19-2. Tested OK.
5. Open 7" Csg., had Water Flow.

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

SIGNED

*J. H. Johnson*

TITLE Asst. Dist. Mgr.

DATE 6-21-82

CERTIFIED BY

J. H. Johnson

TITLE

*J. H. Johnson*

DATE

17. Describe Proposed or Completed Operations Continued:

6. Set Cement Retainer @ 1405'. Squeezed perfs. @ 1500' w/40 Sx. Class 'C' Cement containing 2% CaCl.
7. Ran Temperature Survey. Top of Cement behind 7" Csg. 800'.
8. Perforate 7" Csg. w/2-JS @ 750'. Unable to establish circulation.
9. Perforate 7" Csg. w/2-JS @ 520'.
10. Cement squeeze perfs. @ 520' w/400 Sx. Class 'C' Cement, 4 Sx. flochek & containing 2% CaCl.
11. Ran Temperature Survey. Top of Cement 350'. WOC. DOC. Test Casing to 600#. Small Water Flow.
12. Squeeze perfs. @ 520' w/200 sx. Class 'C' Cement containing 2% CaCl. WOC. DOC. Test. Small Water Flow.
13. Squeeze perfs. @ 520' w/125 sx. Class 'C' Cement containing 2% CaCl. WOC. DOC. Water Flow inside 7" Csg.
14. Squeeze 7" Csg. perfs. @ 520' w/75 sx. Class 'C' Cement & 100 sx. 50/50 Calseal & Class 'C' Cement. WOC. DOC. Flow inside 7" Csg.
15. Cement squeeze 7" Csg. perfs. @ 520' w/250 gals. flochek, 100 sx. Class 'C' Cement containing 2% CaCl, 250 gals. flochek & 100 sx. Calseal Cement. WOC.
16. Tested 7" Csg. to 600# for 30 minutes, 10:00-10:30 AM, 6-5-82. Tested OK.
17. Install pumping equipment. Test & return to production.

## WELL FILE

CITY OF COLORADO SPRINGS

STATE

PERMIT NUMBER

LC-01

U. S. INDUSTRY

NAME

## 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> Water Injection	7. UNIT AGREEMENT NAME <b>Skelly Penrose "A" Unit</b>
2. NAME OF OPERATOR <b>Texaco producing Inc.</b>	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR <b>P. O. Box 728, Hobbs, NM 88240</b>	9. WELL NO. <b>59</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT <b>Langlie Mattix Seven Rivers Queen</b>
Unit Letter P, 660 FSL and 660 FEL	11. SEC., T., R., M., OR Etc. AND SURVEY OR AREA <b>Sec 9, T23S, R37E</b>
14. PERMIT NO. <b>30-025-10679</b>	12. COUNTY OR PARISH <b>Lea</b>
15. ELEVATIONS (Show whether DP, ET, ca. etc.) <b>3295.5 GR</b>	13. STATE <b>NM</b>

## 16. 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) **Repair Casing Leak**

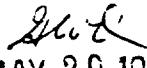

REPAIRING WELL  
ALTERING CASING  
ABANDONMENT\*


(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.)

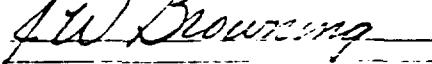
- 04/17/86 - MIRUPU.  
 04/18/86 - TOH w/tbg and pkr. Milled past DV tool at 1152'. TIH with CIBP to 3400'. TIH w/workstring and pkr to 1092'. Tested csg. 1092-3400. Held OK.  
 04/21/86 - Found hole at 740'. Establish circulation. Cemented w/400 sks. Circ. out 10 sks.  
 04/22/86 - TIH w/bit and drill out 373-740 (fell free). Tested 4½" csg to 450#. Did not hold.  
 04/23/86 - TIH w/workstring and spotted 50 SKS "C" 775'-350'. TOH.  
 04/24/86 - Drill cement 354-530 (green).  
 04/25/86 - Drill cement 530-785 (fell free). Tested to 500#. Held ok. Drilled out CIBP at 3400'. Cleaned out to 3634. TOH. Returned to injection.

ACCEPTED FOR RECORD

  
 MAY 20 1986

CARISBAD, NEW MEXICO

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

SIGNED 

TITLE District Admin. Supervisor DATE 05/13/86

(This space for Federal or State stamp)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL: \_\_\_\_\_

STATE OF NEW MEXICO  
MINE AND MINERALS DEPARTMENT

NO. OF FORM RECEIVED	
CITY OR TOWN	SANTA FE
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL RESERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

3a. Indicate Type of Lease	
State <input type="checkbox"/>	Fed <input checked="" type="checkbox"/>
3. 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 S.D. PROPOSALS.)

16. WELL  OTHER - WATER INJECTION WELL

xaco Producing Inc.

lessor or operator

0. Box 728, Hobbs, NM 88240

Location of well:

WELL LETTER B FEET FROM THE North LINE AND 2310 FEET FROM

LINE East SECTION 3 TOWNSHIP 23S RANGE 37E N.M.P.M.

15. Elevation (Show whether DF, RT, CR, etc.)

3304' DF

9. Well No.

13 WEW

10. Field and Pool, or V.H.dcat  
Langlie Mattix Seven Rivers Queen

12. County

Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

DRILL REWORK   
TEMPORARILY ABANDON   
OR ALTER CASING

PLUG AND ABANDON   
CHANGE PLANS   
REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOB   
OTHER

ALTERING CASING   
PLUG AND ABANDONMENT

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.

MIRU Pulling Unit.

POOH with injection equipment.

TIH with packer and plug test 7" production csg.

Found holes in 7" csg from 372' to 930'.

POOH with packer and plug

Set CIBP at 2713

Pump 340 scc Class C cmt w/2% CaCl<sub>2</sub> through 7" csg holes circ. 25 scc cmt to surface.

Tag top of cmt at 206' POOH shut-in well, waiting on approval to plug and abandon.

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

*J.W. Browning*

TITLE District Admin. Supervisor

DATE 10/02/86

OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	

WELL FILE  
WELL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-75

5a. Indicate Type of Lease

State

Fee

5. State Oil & Gas Lease No.

B-155

SUNDY 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.)

OIL WELL  GAS WELL  OTHER

Name of Operator

Texaco Inc.

Address of Operator

P.O.Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER J 1980 FEET FROM THE South LINE AND 1980 FEET FROM

THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMFM.

15. Elevation (Show whether DF, RT, GR, etc.)

3990' (GR)

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

PLUG AND ABANDON

CHANGE PLANS

REMEDIAL WORK

COMMENCE DRILLING OPNS.

CASING TEST AND CEMENT JOB

OTHER Repair Water Flow

ALTERING CASING

PLUG AND ABANDONMENT

17. 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. Rigged up. Pull pump. Install BOP.
2. Set RBP @ 3900'.
3. Perforate 5½" Csg w/2-JS @ 1565'.
4. Set Cement retainer @ 1500'. Cement perfs @ 1565' w/260 sx. thixset cement containing 3% CaCl. Cement circulated. Squeezed w/Addl. 1000 gals flochek & 240 sx thixset cement. WOC.DOC. Cement did not hold.
5. Set cement retainer @ 1500'. Squeezed perfs @ 1565' w/1200 sx thixset cement & 500 gals flchek. WOC.DOC. Cement did not hold.
6. Set cement retainer @ 1500'. Squeezed perfs @ 1565' w/50 sx thixset cement. WOC.DOC.
7. Tested 5½" csg to 600# for 30 minutes, 1:00-1:30 PM, 12-9-81. Tested OK.
8. Install Production equipment. Test & return to production, 12-17-81.

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



TITLE Asst. Dist. Mgr.

DATE 12-21-81

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:



## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form 1-10  
Revised 10-1-73

CITY	
STATE	
TYPE	
SECT.	
LAND OWN.	
OPERATOR	

3. Indicate Type of Lease

 State Federal

4. State Oil &amp; Gas Lease No.

B-2359

## SUNDY NOTICES AND REPORTS ON WELLS

You may use this form for purposes of reporting to the State Oil and Gas Conservation Commission such operations as drilling, completion, or abandonment of wells, or for other purposes as may be specified by the Commission. OTHER Water Injection Well

5. Operator

Texaco Producing Inc.

6. Operator

P.O. Box 728, Hobbs, NM 88240

7. Section of Well

LINE LETTER L

660

FEET FROM THE

West

LINE AND

1980

FEET FROM

8. South

I

17S

RANGE

36E

SECTION

15. Elevation (Show whether DF, RT, GR, etc.)  
3837' DF7. Unit Agreement Name  
Lovington San Andres Unit

8. Field or Lease Name

46

10. Field and Prod., or Name  
Lovington San Andres11. County  
Lea

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

NEW COMMERCIAL HOLE  
  
REPAIRS OR ABANDON  
  
OR ALTER CASING  
PLUG AND ABANDON  
  
CHARGE PLATE  
  
REMEDIAL WORK  
  
COMMERCIAL DRILLING DONE  
  
CASING TEST AND CEMENT JOB  
  
OTHER \_\_\_\_\_ALTERING CASING  
  
PLUG AND ABANDONMENT  
  
Repair Casing Leak  
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operation) SEE RULE 1102.

- 1) MIR. 07/07/86
- 2) Backflowed well 54 hrs. Recovered 4900 BW.
- 3) Installed BOP. Pulled tbg. & pkr.
- 4) TIH w/bit & scraper to 4599'. TOH. TIH w/BP and pkr. Set plug @ 4543.
- 5) B.P. not holding. Move up to 2704'. Test 5½" csg 2704' to surface to 500# OK.
- 6) TOH w/BP & pkr.
- 7) TIH w/tension pkr. Would not set and hold below 2704'. Set @ 2704'.
- 8) SI 1½ hrs. Flowing from surface csg.
- 9) Set CIBP @ 4615'. Cup w/45 sxs class "H" cmt. (4615'-4215')
- 0) Removed BOP. Installed wellhead. RD. 07/11/86.

I declare under penalty of perjury that the information above is true and accurate to the best of my knowledge and belief.*JW Beumling*

District Admin. Supervisor

07/22/86

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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LAND OFFICE	
OPERATOR	

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4/16/82

SA. Indicate Type of Lease

State

Fed

5. State Oil & Gas Lease No.

B-1080

SUNDY 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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER	7. Unit Agreement Name Vacuum Grayburg San Andres Unit
2. Name of Operator Texaco Inc.			8. Farm or Lease Name Vacuum Grayburg San Andres Unit
3. Address of Operator P.O. Box 728, Hobbs, New Mexico 88240			9. Well No. 41
4. Location of Well UNIT LETTER F, 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE, SECTION 1 TOWNSHIP 18-S RANGE 34-E N.M.P.M.			10. Field and Pool, or Wildcat Vacuum Grayburg San Andres
11. Elevation (Show whether DF, RT, GR, etc.) 4003' (DF)			12. County Lea

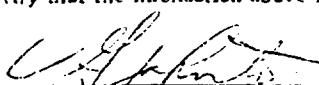
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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 OPS. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	Repair Water Flow <input checked="" type="checkbox"/>
OTHER <input type="checkbox"/>		OTHER <input type="checkbox"/>	

17. 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. Rigged up. Install BOP. Pull submersible pump.
2. Set REP @ 3900' & spot 20' sand on plug.
3. Perforate 7" csg. w/2-JS @ 1565'.
4. Set cement retainer @ 1495'. Cement perfs @ 1565' w/425 sx. Class 'H' Cement containing 2% CaCl. WOC. DOC. Test. Did not hold. Unable to pump into perfs @ 1565'.
5. Perforate 7" csg. w/2-JS @ 1400'.
6. Set cement retainer @ 1335'. Cement squeeze 7" perfs @ 1400' w/75 sx. Class 'C' Cement containing 2% CaCl. Ran Temperature survey. WOC. DOC. Tested csg to 600# for 30 minutes, 11:00-11:30 AM, 4-29-82. Tested OK.
7. Pull RBP & install production equipment. Test & return to production.

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



TITLE Asst. Dist. Manager

DATE 5-14-82

ORIGINAL SIGNED BY

JERRY G. JOHNSON

FDAY 11 1982

APPROVED BY

CLIFFORD J. HARRIS

TITLE

DATE

PRINT NAME IF ANY

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
OPERATOR	

*WELL FILE*  
OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-77

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5b. State Oil & Gas Lease No.
B-1031

**SUNDRY NOTICES AND REPORTS ON WELLS**

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL UP TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT - I" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL  GAS WELL  OTHER

2. Name of Operator

Texaco Inc.

3. Address of Operator

P.O. Box 728, Hobbs, New Mexico 88240

4. Location of Well

UNIT LETTER I . 2310 FEET FROM THE South LINE AND 660 FEET FROM  
THE East LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E NWPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
3967' (GR)

7. Unit Agreement Name  
Central Vacuum Unit

8. Farm or Lease Name  
Central Vacuum Unit

9. Well No.  
109

10. Field and Pool, or Wildcat  
Vacuum Grayburg  
San Andres

12. County  
Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING

PLUG AND ABANDON   
CHANGE PLANS

REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CASING TEST AND CEMENT JOBS   
OTHER

ALTERING CASING   
PLUG AND ABANDONMENT   
Repair Water Flow

17. 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. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3920' & dump sand on plug.
3. Perforate  $3\frac{1}{2}$ " Csg. w/2-JSPF @ 1565'.
4. Cement perfs. @ 1565' w/315 sx. Class 'H' Cement containing 2% CaCl. Cement Circulated. Squeeze w/addl. 85 sx. Class 'H' Cement containing 2% CaCl. WOC. DOC.
5. Tested Csg. to 500# for 30 minutes, 10:00-10:30 AM, 7-15-82. Tested OK.
6. Install pumping equipment. Test & return to production.

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

SIGNED

TITLE Asst. Dist. Mgr.

DATE 8-16-82

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

REASON FOR APPROVAL, IF ANY:

OPERATOR'S COPY  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other Water Injection

2. NAME OF OPERATOR  
TEXACO Inc.

3. ADDRESS OF OPERATOR  
P. O. Box 728, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1650' FSL & 1651' FEL  
AT TOP PROD. INTERVAL: (Unit Letter 'J')  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:  
TEST WATER SHUT-OFF    
FRACTURE TREAT    
SHOOT OR ACIDIZE    
REPAIR WELL    
PULL OR ALTER CASING    
MULTIPLE COMPLETE    
CHANGE ZONES    
ABANDON\*    
(other) OF: REPAIR WATERFLOW

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.)\*

1. Rigged up.
2. Cemented 4½" casing leak @ 560' W300 sx. Class H Cement containing 3% CACL, 10# Sand and ½# Flocele per sack. Did not hold.
3. Cemented W/1000 gals Flochek followed W/100 sx. class 'H' Cement containing 2% CACL. WOC. DOC.
4. Tested casing to 600# for 30 minutes, 9:45-10:15 AM, 9-30-83. Tested OK.
5. Set CIBP @ 2720'. Cemented casing annulus W/310 sx class 'H' Cement. Cement circulated. WOC.
6. Clean out well.
7. Ran 2 1/16" plastic coated injection tubing W/pkr. and set @ 2645'. Load annulus W/inhibited water. Well tested for 24 Hours, ending 11-17-83. Injected 200 bbls water @ 1500#.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED K. G. Johnson TITLE Asst. Dist. Mgr. DATE 11-28-83

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY GLW TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

MAY 8 1984

Carlshad

NEW MEXICO

\*See Instructions on Reverse Side

Nov 29 9 16 AM '83  
RECEIVED  
BUR. LAND MGMT.  
ROSWELL DISTRICT

STATE OF NEW MEXICO  
GEOLOGICAL SURVEY  
DIVISION OF MINES  
CITY OF SANTA FE  
SANTA FE  
FILE  
J.S.C.B.  
LAND OFFICE  
OPERATOR

OIL CONSERVATION DIVISION  
P.O. BOX 2028  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 12-1-73

5. Indicate Type of Lease	
State	<input type="checkbox"/>
Fee <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REPAIR OR PLUG EXISTING OR A DISPERSED RESERVOIR.  
USE "APPLICATION FOR PERMIT TO DRILL C-1811" FOR SUCH PROPOSALS.

GAS

OIL

OTHER

Injection Well

TEXACO PRODUCING, Inc.

P.O. Box 728, Hobbs, N.M. 88240

7. UNIT AGREEMENT NAME  
Myers Langlie  
Mattix Unit

8. Form or Lease Name

9. Well No.

173

10. Field and Pool, or区块  
Langlie Mattix  
7-Riv. Queen

11. LETTER K FEET FROM THE South LINE AND 1916 FEET FROM

12. West LINE, SECTION 6 TOWNSHIP 24 South RANGE 37 East

13. Elevation (Show whether DF, RT, CR, etc.)  
3329.5 DF

14. County  
LEA

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

11. REMEDIAL WORK	<input type="checkbox"/>	12. PLUG AND ABANDON	<input type="checkbox"/>	13. REMEDIAL WORK	<input type="checkbox"/>	14. ALTERING CASING
12. REPAIR BOP	<input type="checkbox"/>	13. CHARGE PLANS	<input type="checkbox"/>	15. COMMENCE DRILLING OPS.	<input type="checkbox"/>	16. PLUG AND ABANDONMENT
13. ALTER CASING	<input type="checkbox"/>	14. OTHER	<input type="checkbox"/>	17. CAVING TEST AND CEMENT JOB	<input type="checkbox"/>	18. OTHER
15. OTHER	<input type="checkbox"/>	16. OTHER	<input type="checkbox"/>	17. OTHER	<input type="checkbox"/>	18. OTHER
Repair csg. leak <input checked="" type="checkbox"/>						

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operation) SEE RULE 1103.

1. Rig up pulling unit and install BOP.
2. TOH with 2 3/8" salta lined tubing and Baker AD-1 packer from 3338'.
3. TIH with workstring packer and retrievable bridge plug and locate leak in 7" casing.
4. Establish rate into casing leak if possible.
5. TOH with workstring packer and RBP.
6. If necessary, perforate the 7" casing at the leak with 2 Holes using 4" casing guns to establish rate.
7. TIH with CIBP to 3338' and set CIBP.
8. TIH with workstring and cement retainer to + 150' above casing leak and set retainer.
9. Squeeze 7" casing leak using class "K" cement with accelerator.
10. Stingout of retainer and reverse out excess cement.
11. TOH with workstring.
12. WOC 24 hrs.
13. TIH with workstring and 6 1/8" bit and drill out cement and cement retainer to top of CIBP at 3338'.
14. Close the BOP and test the squeeze job to 500 psi by pressuring through bit.
15. Drill out CIBP and clean out 6 1/8" open hole to TD (3620').

The information above is true and complete to the best of my knowledge and belief.

See Reverse Side---

15. b/w

Title Dist. Inc. Mar.

11-18-85

16. TOH with workstring and bit.
17. TIH with 2 3/8" injection tubing and packer to 3338' and set packer.
18. Load annulus w/ inhibited water and return to injection.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 12-1-77

NO. OF LEADS RECEIVED	
CITY SECTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease

State

Fee

5b. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS C. WELLS

130-103 USE THIS FORM FOR PROPOSALS TO DRILL OR TO DRILL IN OF ONE WELL BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR ALL OTHER PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Myers Langlie Mattix
2. Name of Operator Texaco Producing Inc.	8. Farm or Lease Name
3. Address of Operator P.O. Box 728, Hobbs, NM 88240	9. Well No. 228
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 10 TOWNSHIP 24S RANGE 37E NWPM.	10. Field and Pool, or Wildcat Langlie Mattix Seven Rivers Queen
15. Elevation (Show whether SF, RT, CR, etc.) 3259' DF	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REWELLS & WORK   
TEMPORARILY ABANDON   
PULL OR ALTER CASING   
OTHER \_\_\_\_\_

PLUG AND ABANDON   
REMEDIAL WORK   
COMMENCE DRILLING OPS.   
CHANGE PLANS   
CASING TEST AND CEMENT JOBS   
OTHER \_\_\_\_\_

ALTERING CASING   
PLUG AND ABANDONMENT

Repair Casing Leak

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE FULG 103.

- 1) RUPU. Install BOP.
- 2) TOH w/2 3/8" tbg. and Baker AD-1 pkr from 3298'.
- 3) TIH w/workstring pkr and RBP & locate csg leak. Establish rate if possible.
- 4) TOH w/workstring pkr and RBP.
- 5) Perforate 6" csg @ leak depth if necessary, if leak is found above 1250', Perforate at 1250'.
- 6) TIH w/workstring and CIBP to +3225' and set plug.
- 7) TOH w/workstring.
- 8) TIH w/workstring and 6" cmt. retainer to +150', above csg leak.
- 9) Cmt. squeeze leak using class H cmt. Use volumes and rate as per established rate.
- 10) Sting out of the retainer and circ. out the excess cmt.
- 11) TOH w/workstring.
- 12) WOC 24 hrs.
- 13) TIH w/workstring & bit & drill out retainer and cmt.
- 14) Close the BOP and test the squeeze to 500 PSI by pressuring through the bit.
- 15) Drill out the CIBP and clean out wellbore to TD (3599') TOH w/workstring & bit.
- 16) TIH w/injection tbg and pkr to +3250' and return well to injection.

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

SIGNED J.W. Beuving

TITLE District Admin. Supervisor

DATE July 25, 1986

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONSIDERATION OF APPROVAL IF ANY

ITE OF : CO  
NO. 44-131 DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 12-1-73

3a. Indicate Type of Lease	
State	<input checked="" type="checkbox"/>
Fee	<input type="checkbox"/>
3b. State Off & Siz Lease No.	
B-1327	

## SUNDY NOTICES AND REPORTS ON WELLS

~~DO NOT USE THIS FORM FOR PROPOSALS TO REBILB OR TO SELECT A PLUG BACK TO A DIFFERENT BENDOVER.  
USE "APPLICATION FOR PERMIT" IN 1000M C-181 FOR SUCH PROPOSALS.~~

<input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/>	Operator	INJECTION WELL	7. Unit Agreement Name MLMU
✓TEXACO PRODUCING INC.			8. Form or Lease Name
at Operator P.O. BOX 728, HOBBS, NEW MEXICO 88240		9. Well No. 77	
at Well LETTER <u>G</u> . <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM		10. Field and Pool, or Wildcat Langlie Mattix Queen /-River	
East LINE, SECTION <u>32</u> TOWNSHIP <u>23S</u> RANGE <u>37E</u> BMU.			
15. Elevation (Show whether DF, RT, GR, etc.) 3306' DF		12. County Lea	

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

**NOTICE OF INTENTION TO:**

SUBSEQUENT REPORT OF:

REMEDIAL WORK PLUG AND ABANDON	<input type="checkbox"/>	REMEDIAL WORK COMMENCE DRILLING OPS.	<input type="checkbox"/>	ALTERING CASING PLUG AND ABANDONMENT	<input type="checkbox"/>
CHARGE PLANS	<input type="checkbox"/>	CASING TEST AND CEMENT JOB	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>
REPAIR CASING LEAK			<input checked="" type="checkbox"/>		

**4. Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed.)**  
**SEE RULE 1103.**

Rig up. POH w/injection equipment.

TIH w/WS, pkd and RBP and locate csg. leak. TOH w/WS and tools.

TIH W/5. 1/2" -cast iron bridge plug to + 3263' and set plug. TOH.

Perf 5 1/2" csg. at leak depth w/2 holes using 4" csg. guns.

TIH w/5 1/2" cmt. retainer to + 150' above csg. leak and set retainer.

Squeeze the csq. leak using class "H" cmt.

Sting out of retainer w/WS and circ. out excess cmt. TOH w/WS. WOC 24 hrs.

String out or retainer w/ WS and drill out retainer and cement to top of CIBP.

Close BOP and test squeeze job by pressuring through the bit to 500 psi.

Drill out CIBP and C/O wellbore to PBTD (3717'). TOH w/WS and bit.

TII w/injection tbg. and pkr. to 3263' and load annulus w/inhibitor

and read liquids w/ inhibited well.

and return well to injection.

THESE DOCUMENTS ARE PROVIDED AS IS, WITH NO WARRANTY OF ANY KIND, TO THE FULLEST EXTENT PERMITTED BY LAW.

*W.B.Ldn*

Dist. Opr. Mgr.

10/4/85

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE.  
(Other instructions on reverse side)

Bureau Barac No. 1004-1-15  
Expires August 31, 1985  
5. LEASE DESIGNATION AND SERIAL NO.

LC-057420

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDY 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.)

1. OIL WELL  GAS WELL  OTHER  INJECTION WELL

2. NAME OF OPERATOR

TEXACO PRODUCING INC.

3. ADDRESS OF OPERATOR

P.O. BOX 728, HOBBS, NM 8840

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

UNIT LTR. M, 330 FSL & 330 FWL

14. PERMIT NO.

30-025-10855

15. ELEVATIONS (Show whether DP, RT, GR, etc.)

3303'

7. UNIT AGREEMENT NAME

MLMU

8. FARM OR LEASE NAME

9. WELL NO.

47

10. FIELD AND POOL OR WILDCAT  
Langlie Mattix 7-Rivers  
Queen

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA  
Sec. 28, T23S, R37E

12. COUNTY OR PARISH 13. STATE

Lea

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLATE

(Other) Repair csg. leak

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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.)

1. Rig up. POH w/injection equipment.
2. RIH w/WS, 5 1/2" pkr and 5 1/2" RBP and locate csg leak. Establish injection rate into leak if possible. POH w/WS, pkr to RBP.
3. If necessary, perf 5 1/2" csg at leak w/2 holes using a 4" csg gun to establish injection rate.
4. RIH w/WS and 5 1/2" CIBP and set at 3400'. POH w/WS.
5. RIH w/WS and 5 1/2" cmt retainer and set the retainer at  $\pm$  150' above the csg leak.
6. Squeeze cement the csg. leak using class "H" cmt.
7. Sting out of the retainer and circ. out the excess cmt. POH w/WS. WOC 24 hours.
8. RIH w/WS and 4" bit and drill out the retainer and cmt to the top of the CIBP.
9. Close the BOP and pressure test the cmt. job to 500 psi by pressuring through the bit.
10. Drill out the CIBP & C/O to PBTD 3639'. POH w/WS and bit.
11. RIH w/injection tbg. and pkr. to  $\pm$  3450' and set pkr.
12. Load annulus w/inhibited wtr and return well to injection.

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

SIGNED

W.B. Lut

TITLE DISTRICT OPR. MGR.

DATE 10/10/85

(This space for Federal or State office use)

APPROVED BY H. Parker Decker TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

DATE 10/28/85

Subject to

Like Approval

by State

\*See Instructions on Reverse Side

Form 9-331  
Dec. 1973

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well  gas well  other Water Inj. Well

2. NAME OF OPERATOR  
Texaco Inc.

3. ADDRESS OF OPERATOR  
P.O. Box 728, Hobbs, N.M. 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: Unit Ltr L, 1650 FSL & 660 FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
(other) Repaired csg. leak		

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.)\*

1. Rigged up. Pulled tbg. and pkr.
2. Ran plug and pkr on 2 7/8" tbg. Set plug at 2750'. Tested to 1000#. Lower pkr and set down at 543'. Drag to 525'. Bad pipe from 513-697'.
3. Ran tbg. Tag at 545'. Work through bad pipe to 620'.
4. Ran tbg. OE and spotted SD on BP at 2750'.
5. Ran taper mill and tag at 545'. Mill to 570', pull up and went down out of pipe in red beds.
6. Ran 4 1/2" spear, pull 16 jts. 539' of 4 1/2" 9.5# csg., csg. eaten away. Ran 6 1/4" skirted mill, tag csg. @ 545', turn and fell 2' over fish, milled to 551'.
7. Ran csg. bowl w/lead seal on 13 jts. 4 1/2" csg. WO FSH at 551'. Cut off csg.
8. Ran 3 7/8" bit to 2734'.

(OTHER SIDE)  
Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED W. S. Cuk TITLE Dist. Opr. Mgr DATE 8/19/85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

## Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local office or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices, addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant oil and gas contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site mentioned for final inspection looking to approval of the abandonment.

9. Ran 4 1/2" pkr and set at 2680'. RSH SD FP. BP 2734-2750'.
10. Pushed BP to 2770'. Unable to get plug loose.
11. Ran short catch OS. Pulled BP.
12. Ran 4 1/2" lokset and set at 2688'.
13. Close Rams and test. No FB. LD 2 7/8" WS. Did not recover pkr.
14. Retrieve BP.
15. Ran 4 1/2" pkr. and 2672', 2 3/8" J-55 TK-75 tbg.
16. Displace hole w/treated water. PSA 2683'. Loaded annulus w/inhibited water.
17. Placed on injection.

11-17-14

		CIL CONSERVATION DIVISION	
		P. O. BOX 2088	
		SANTA FE, NEW MEXICO 87501	
		Form C-103 revised 10-1-73	
		6. Indicate Type of Lease	
		State <input type="checkbox"/> Foreign <input checked="" type="checkbox"/>	
		7. State CIL & CGS Lease No.	
		8. Unit Agreement Name	
		Myers Langlie Mattix Unit	
		9. Form of Lease Name	
		10. Well No.	
		195	
		11. Field and Section, or Kidder	
		Langlie Mattix 7-Riv. Que	
		12. County	
		Lea	
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:			
REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
REMEDIAL WORK	<input type="checkbox"/>	COMMENCE DRILLING BORES	<input type="checkbox"/>
ALTERING CASING	<input type="checkbox"/>	CASING TEST AND CEMENT JOBS	<input type="checkbox"/>
PLUG AND ABANDONMENT	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
SUBSEQUENT REPORT OF:			
CHANGE PLANS	<input type="checkbox"/>		
Repair csg leak	<input checked="" type="checkbox"/>		

**Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operation.)**  
**SEE RULE 1103.**

1. MIRU pulling unit and pull 5/8" rods and pump from 3582'.
  2. Install BOP and pull 2 3/8" tubing from 3598'.
  3. RIH w/workstring, pkr and RBP (5 1/2" csg) and locate csg leak.
  4. Establish the inj. rate out of the 5 1/2"-8 5/8" csg annulus using produced water if possible.
  5. POOH w/workstring, pkr and RBP.
  6. If necessary, perf 5 1/2" csg at leak w/2 holes using a 4" csg gun to establish rate. If leak is found above 1250', perf 5 1/2" csg at 1250'.
  7. RIH w/CIBP and set at 3425'.
  8. POOH w/workstring.
  9. RIH w/5 1/2" cmt ret and set the ret at + 150' above the csg leak.
  10. Circ. class H cmt to the surf through the 5 1/2" csg leak. (Approx. 300 sx 1579' to surf).
  11. String out of the ret and circ out the excess cmt.
  12. POOH w/workstring.
  13. WOC for 24 hours.
  14. RIH w/workstring and 4 1/2" bit and drill out ret and cmt to the CIBP. Close the BOP and pressure test the cmt job to 500 PSI through the bit, if necessary, re-squeeze.

Digitized by srujanika@gmail.com

1. RIH w/ workstring and pkr.  
2. RIH w/ workstring and pkr and set the pkr at 3460'.  
3. Acidize open hole section (3519'-3608') w/ 4000 gal 15% NEFE HCL acid containing 3% checker-sol (110 gal) and rock salt for diversion, acidize at 3-6 BPM and at a maximum pressure of 4500 psi.  
4. Flow and/or swab back load.  
5. POOH w/ workstring and pkr.  
6. RIH w/ production equipment and return the well to production.

EXCO WELL NO.	
WELL NUMBER	
PERIOD	
STATE	
LEASE	
TYPE	
RCR	

CIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 12-1-73

1. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
2. State Oil & Gas Lease No.	

SUNDY NOTICES AND REPORTS ON WELLS

OR USE THIS FORM FOR PROPOSALS TO OPERATE OR REOPERATE, PLUS DUE TO A DIFFERENT LESSOR.

3. Gas Well <input type="checkbox"/>	Injection well	7. Unit Agreement Name Myers Langlie Mattix Unit
4. Operator EXACO PRODUCING INC.		8. Form of Lease Name
5. Address P.O. BOX 728, HOBBS, N.M. 88240		9. Well No. 81
6. Well No. G	1980 FEET FROM THE LINE AND North	10. Field and Pool, or Wildcat Langlie Mattix 7-Riv. Que
7. East LINE, SECTION 33	TOWNSHIP 23S	RANGE 37E CUMPS.
11. Elevation (Show whether DF, RT, GR, etc.) 3349' DF		12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
Y ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>
ALTERING CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
CHANGE PLATE <input type="checkbox"/>	
OTHER <input type="checkbox"/>	
Repair csg. leak <input checked="" type="checkbox"/>	

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

13. Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed.)  
See Rule 1103.

- 1. Flow well back to pit to relieve pressure
- 2. RU pulling unit & install BOP.
- 3. TOH w/2 3/8" IPC tbg and Baker AD-1 pkr from 3283'.
- 4. TIH w/workstring, pkr and RBP and locate csg. leak. Est. inj. rate into leak if possible.
- 5. TOH w/workstring and tools.
- 6. TIH w/workstring adn CIBP to + 3283' and set CIBP.
- 7. Perf. th3 5 1/2" csg. at leak depth w/2 holes using a 4" csg. gun if necessary to establish rate.
- 8. TIH w/workstring and 5 1/2" ret. to + 150' above the csg. leak and set ret.
- 9. Squeeze the csg. leak using class H cmt.
- 10. Sting out of ret. w/workstring and circ. out excess cmt.
- 11. TOH w/workstring.
- 12. WOC 24 hours.
- 13. TIH w/workstring and bit and drill out ret. and cmt. to top of CIBP.
- 14. Pressure test the squeeze job to 500 psi by closing BOP and pressuring through bit.
- 15. Drill out CIBP and clean out wellbore to PBTD.
- 16. TOH w/workstring and bit.

(OTHER SIDE, PLEASE)

I declare under penalty of perjury that the information above is true and complete to the best of my knowledge and belief.

W. St. L.

Title \_\_\_\_\_ Dist. Opr. Mar. \_\_\_\_\_

Date 9/19 85

17. TII w/inj. ann. and pkr. to  $\pm$  3283', load annulus w/inhib. wtr.  
and return to inj.





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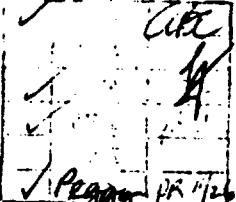
3

2

Tulsa

NOV 16 1974

Offices 11/26  
Bob Brown  
Please provide  
Elvira's request.



PROGRAM NAME: Cedar Canyon Group

MIDLAND E&P DISTRICT

STATE : New Mexico

PROGRAM NO: 630-03-04-01

DATE : November 14, 1974 REVIEWED BY (DEPT) :

COUNTY : Eddy

This is a request for authorization of an additional \$120,762 net (\$125,000 gross) development drilling funds, category 321, for drilling and completing the Forty Niner Ridge Unit Well No. 2. This well has been drilled to a T.D. of 14,600' and is fishing. Twenty seven drill collars and a 6 $\frac{1}{2}$ " bit were dropped in the hole as a result of running the blocks into the crown. There were no injuries.

Drill stem tests and open hole logs indicate probable commercial production for this well.

Expenditures to date amount to approximately \$906,197 net (\$938,000 gross). The authorizing AAT dated September 10, 1974 is in the amount of \$1,017,988 net (\$1,053,714 gross). Additional funds to complete the project are estimated at \$120,762 net (\$125,000 gross).

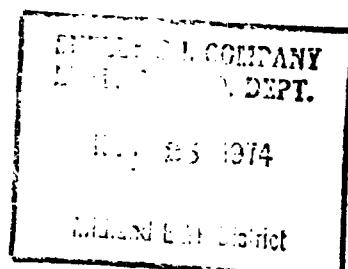
These additional requirements are the result of underestimating the costs of tubular goods and additional expenses incurred following the rig accident.

These requested additional funds are not available in the district budget.

Leland Franz  
Leland Franz

Audra B. Cary  
Audra B. Cary

BOB/ss



\*Dear Mr. Walker w/b Craddell & determine specifically our additional & costs, i.e. everything contractual was determined to be not liability for **Extra Costs**

Provides a complete & accurate determination  
determine if Craddell has negotiated an understanding  
standing fee/Contractor regarding any reimbursement  
meets to Shelly. PD 11/26/74



New Dept.  
Teles

Opp Ech O

OPERATIONS REPORT

MIDLAND E&P DISTRICT

PROGRAM NAME: Cedar Canyon Group

PROGRAM NO: 630-03-04-01

STATE : New Mexico

COUNTY : Eddy

DATE : December 10, 1974 REVIEWED BY (DEPT) :

Per Mr. Teal's request of November 21, 1974, on copy of our operations report dated Nov. 14, 1974, this is to report a breakdown of additional costs incurred by Skelly as a result of the recent rig accident on the Skelly operated Forty Miner Ridge No. 2.

The total cost over the ten-day period amounts to \$10,300. A breakdown of the costs are as tabulated below:

	<u>Costs per day</u>
Drill pipe rental	\$ 25
Fuel purchase	150
Shale shaker rental	45
Drilling head rental	40
Pit volume indicator rental	25
Drilling mud purchase	125
Water purchase	50
Trailer house rental	10
	<hr/> <u>\$ 1,030</u>

We have negotiated monetary liability and agreed to the Contractor assuming the remaining ten day costs of fishing plus rig repairs.

(SIGNED) LELAND FRANZ

Leland Franz

(SIGNED) AUDRA B. CARY

Audra B. Cary

BOB/ss

O

DISTRICT OFFICE  
FILE COPY

12/10/74

Page 100

Mr. Jones, Head-Area Sup.

Oct 17, 1986



Off. Off. P

FIRM AREA: Management Sub Areas (Hobbs Area)

DATE:

Oct 17, 1986

TANK BATTERY OR FIELD INSTALLATION	FORMATION OR ZONE	PRODUCTION (bpd)	CONCENTRATION TANK (ppm)	HHS CONCENTRATION ENCLOSURE ZONE (ppm)	WIND DIRECTION (mph)	GAUGE METHOD	FIELD RECOVERY METHOD	VAPOR RECOVERY METHOD	LEAK RATE	WIND WARDING SIGN	RESPIRATORY PROTECTION FOR GAUGING
------------------------------------	-------------------	---------------------	--------------------------------	---	----------------------------	-----------------	-----------------------------	-----------------------------	--------------	-------------------------	--

American Nat'l Inc.											
Keweenaw Area (Powership) L.L.C.	Gr-SA	13	10	—	1/SE	M	P	No	No Yes	Yes	Yes
T. Anderson Inc.	Gr-SA	Skull Inn									
T. Anderson Inc.	10**2	Red Rock	2	3.9	—	3/SE	M	P	No	No Yes	Yes
T.D. Federal	Delaware	44	—	—	2/9	M	P	No	No Yes	No	No
		Norwell	2	—	—	1/9	M	P	No	No No	No
		Arkos	14	—	—	9/5	M	P	No	No No	No
		Rock Springs	15	5	—	3/5E	M	P	No	No No	No
		Delaware	24	—	—	2/5	M	P	No	No No	No
A.K. Christies G.	El-SA	2	—	—	4/SE	M	P	No	Yes Yes	Yes	Yes

DEFINITION OF CONCENTRATION ZONE  
1 = Above the tank fence.

GAUGE METHOD

Method of production  
A = automatic gauge reading

FIELD RECOVERY METHOD

P = primary  
W = secondary  
T = tertiary  
S = semi-tertiary

# NAME/STATION: New Mexico Area Spill HYDROGEN SULFIDE SURVEY

DATE: Oct. 17, 1986

FIELD AREA: New Mexico Sub Area (Hobbs Area)

FIELD AREA: <u>New Mexico Sub Area (Hobbs Area)</u>	DATE: <u>Oct. 17, 1986</u>											
TANK SIGHTING OR FIELD INSTALLATION	FORMATION OR ZONE	OIL PRODUCTION [bpd]	H <sub>2</sub> S CONCENTRATION TANK MATH (ppm)	H <sub>2</sub> S CONCENTRATION BREAKAWAY ZONE (ppm)	WIND SPEED DIRECTION [mph]	GAUGE RECOVERY METHOD	FIELD RECOVERY	VAPOR RECOVERY	LATE	MIND ROCK	WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
Cook - Hartley	E-SA	3	50	-	4/SE	M	P	No	No	Yes	Yes	Yes
J.W. Cooper Cotton Draw Unit (ACT) (T13 #1)	E-SA	15	500	-	4/SE	M	P	No	No	Yes	Yes	Yes
Gamma Anhydrite Produced Water	Delaware	260	250	-	2/SE	L	W	Yes	Yes	Yes	Yes	Yes
High 2 - <del>High 3</del>	Delaware	—	600	-	3/SE	A	W	No	No	Yes	Yes	Yes
Oilfield Draw Unit	Delaware	6	400	-	3/SE	L	W	No	Yes	Yes	Yes	Yes
T.A. - <del>#68</del>	Wolfcamp	10	0	-	2/SE	M	W	No	No	Yes	Yes	No
East Economy Unit	TSM	0	-	2/SE	M	P	No	No	No	No	No	No
S. Segment ACT	E-TB-71	11,050	-	3/SE	L	W	No	Yes	Yes	Yes	Yes	Yes
S. Segment Produced Water Tank	—	6,350	-	3/SE	M	W	No	Yes	Yes	Yes	Yes	Yes

Reporting zone concentrations are:

1. Average of approximately 100 feet.

FIELD RECOVERY METHOD:

P = primary  
W = witness  
L = witness  
S = simultaneous

Method

# HARRISON, HARRIS AND AME Super HYDROGEN SULFIDE SURVEY

FIELD AREA: Monument Sub Area (Hebber Area)

DATE: Oct. 17, 1986



FIELD AREA	TANK BATTERY OR PIPE INSTALLATION	FORMATION OR ZONE	Oil PRODUCTION (bpd)	H2S CONCENTRATION TANK MATE (ppm)	H2S CONCENTRATION BREATHING ZONE (ppm)	WIND DIRECTION (mph)	GAUGE RECOVERY METHOD	FIELD RECOVERY	VAPOR RECOVERY	LACT	WIND TACK	WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
X East Eauake Unit	Central Segment Act	X-TR-41	70	900	-	3/SE	L	W	No	Yes	Yes	Yes	Yes
Contra Costa segment	Producer Water Tank	-	-	700	-	3/SE	M	W	No	Yes	Yes	Yes	Yes
North Segment	Tracts #9-11-56-96	Y-TR-14	3	0	-	3/SE	M	P	No	No	Yes	Yes	Yes
Eddy State Act	Del Norte	6	0	-	1/SE	M	P	No	No	No	No	Yes	Yes
Future - Monmouth River	LT-9A	100	1600	-	1/8	L	W	No	Yes	Yes	Yes	Yes	Yes
K ACT	Future - Monmouth Unit	-	-	250	-	1/8	M	W	No	Yes	No	Yes	Yes
Future - Monmouth Unit	Producer Water	-	-	-	1/8	M	P	No	No	Yes	No	No	No
X Federal 34	Gas Springs	10	0	-	1/8	M	P	No	No	Yes	No	No	No
X Federal 34	Delaware	1	1150	-	1/8	P	W	No	No	Yes	Yes	No	No

Drilling tools concentrations are  
based on approximate  
10' above the tool bit.

GAUGE METHODS

S = daily manual gauge  
L = LACT reading for production  
A = automatic gauge reading

FIELD RECOVERY METHOD:

P = primary  
W = secondary  
V = venting  
S = steamlined

# NAME: Lake A. Head-Area Super HYDROGEN SULFIDE SURVEY

DATE: Oct. 17, 1986

FIELD AREA: Monument Sub Area (Hobbs Area)

NAME OF FIELD APPA OR FIELD INSTALLATION	FORMATION OR ZONE	OIL PRODUCTION (bpd)	N <sub>2</sub> S CONCENTRATION IN TANK MATH (ppm)	N <sub>2</sub> S CONCENTRATION IN BREATHING ZONE (ppm)	WIND SPEED (mph)	GAUGE RECOVERY METHOD	FIELD VAPOR RECOVERY	VAPOR RECOVERY LAST	WIND DIRECTION	WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
[REDACTED]	Morrow	.5	0	-	3/5	M	P	No	No	No	No
[REDACTED]	Morrow	.2	0	-	3/5	M	P	No	No	No	No
[REDACTED]	Delaware	2.5	0	-	3/5	M	P	No	No	No	No
[REDACTED]	Lake Springs	3	0	-	3/5	M	P	No	No	No	No
[REDACTED]	Seven Rivers	7	0	-	5/5w	M	P	No	No	Yes	No
Cherry Fowler	Penry.	.5	0	-	5/5	M	P	No	No	No	No
Shanks T.M. Field (N.W.)	Atoke	.5	0	-	5/5	M	P	No	No	No	No
[REDACTED]	Morrow	1	0	-	5/5	M	P	No	No	No	No
[REDACTED]	Morrow	.5	0	-	3/5	M	P	No	No	No	No

Scouting zone concentrations are  
taken at approximately  
10' above the tank base.

GAUGE METHOD

M = daily manual gauge  
L = LACT reading for production  
A = automatic gauge system

FIELD RECOVERY METHOD:

P = primary  
W = secondary  
I = tertiary  
S = sterilized



# NAME/INITIALS: James Allard - Aer. Supt. HYDROGEN SULFIDE SURVEY

FIELD AREA: Monument Sub-Area (Hobbs Area)

DATE: Oct 17, 1986

FIELD AREA: TANK BATTERY OR FIELD INSTALLATION	FORMATION OR ZONE	OIL PRODUCTION (bbls)	H2S CONCENTRATION TANK HATCH (ppm)	H2S CONCENTRATION, BREATHTAKING ZONE (ppm)	WIND SPEED DIRECTION (mph)	FIELD GAUGE RECOVERY METHOD	FIELD VAPOR RECOVERY METHOD	VAPOR RECOVERY LAST CHECK	WIND ROCK SIGN	RESPIRATORY PROTECTION FOR GAUGING
Pine Springs	10	40	-	4/5	M	P	No	No	No	No
Morrone	2	0	-	6/5	M	P	No	No	No	No
Morrone	15	0	-	5/5	M	P	No	No	No	No
Morrone	T3+M	53	-	7/SE	M	P	No	No	No	No
Morrone	3	53	-	10/5	M	P	No	No	No	Yes
Pine Springs	303	300	-	10/5	M	P	No	Yes	No	Yes
Morrone	1	0	-	10/5	M	P	No	No	No	No
Wolfcamp	1	0	-	10/5	M	P	No	No	No	No

RECORDING TYPE CONVENTIONS ARE  
AS FOLLOWS:  
M = daily manual gauge  
L = DACT readout for production  
A = above the last check

GAUGE METHODS:

M = daily manual gauge  
L = DACT readout for production  
A = above the last check

FIELD RECOVERY METHODS:

P = primary  
W = witness  
I = witness  
E = eliminated

**WILMINGTON, JAMES A. MUD AREA SUPER HYDROGEN SULFIDE SURVEY**

Date: Oct 17, 1986

FIELD AREA: **Monument Sub Area (Hobbs Area)**



FIELD AREA	FORMATION OR ZONE	PRODUCTION Type	H <sub>2</sub> S CONCENTRATION TANK HATCH (ppm)	H <sub>2</sub> S CONCENTRATION BREATHING ZONE (ppm)	WIND SPEED Direction (mph)	GAUGE METHOD	FIELD RECOVERY METHOD	VAPOR RECOVERY	LACT TEST	WIND ROCK SIGN	RESPIRATORY PROTECTION FOR GAUGING
Yates - NR	3	5	-	1/5	N	P	No	No	Yes	Yes	No
W. D. Grimes											
Drikkard	2	0	-	5/5W	M	P	No	No	Yes	Yes	No
Atoke	1	0	-	2/SE	M	P	No	No	Yes	Yes	No
Delaware	1	0	-	2/SE	M	W	No	No	Yes	Yes	No
Y. GR. #4											
B-T-DK	12	20	-	4/SE	M	P	No	No	Yes	Yes	No
M. Ed Daughtry	LR-SA	Temperature Abundanced									
Levengood East	Morrow	0	0	10/5W	M	P	No	No	No	No	No
Audie Kuckens	Morrow	2	0	1/5	M	P	No	No	Yes	No	No

Presenting some concentrations are  
given at approximately  
10' above the top rock.

GAUGE METHOD

M = daily manual gauge  
L = LACT reading for production  
A = automatic gauge reading

FIELD RECOVERY METHOD:

P = primary  
W = wellhead  
I = interior  
S = stemline

# Nineteenth Head-Area Survey: HYDROGEN SULFIDE SURVEY

DATE: Oct. 17, 1986

FIELD AREA: Monument Sch Area (Hobbs Area)

TIME SAVING ON FIELD INSTALLATION	FORMATION ON ZONE	PRODUCTION (bpd)	H <sub>2</sub> S CONCENTRATION TANK HATCH (ppm)	H <sub>2</sub> S CONCENTRATION BREAKTHROUGH ZONE (ppm)	WIND SPEED DIRECTION (mph)	GAUGE METHOD	FIELD RECOVERY METHOD	VAPOR RECOVERY	LACT	WIND ROCK	WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
<u>Kern State</u>	<u>Morrow</u>	<u>TSTM</u>	<u>0</u>	<u>-</u>	<u>10/S</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>No</u>
<u>Unmarked Water</u>	<u>Yates - 2 Rows</u>	<u>54</u>	<u>1800</u>	<u>-</u>	<u>3/S</u>	<u>L</u>	<u>P</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>Atoke</u>	<u>TSTM</u>	<u>0</u>	<u>-</u>	<u>3/4</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>No</u>	<u>No</u>	<u>No</u>	<u>No</u>
<u>H.T. Matherne</u>	<u>G - SA - Y</u>	<u>60</u>	<u>4,000</u>	<u>-</u>	<u>4/S</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>H.D. McKinley</u>	<u>7-R</u>	<u>1</u>	<u>0</u>	<u>-</u>	<u>5/SW</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>No</u>
<u>H.D. McKinley</u>	<u>84 Rock</u>	<u>18</u>	<u>13,500</u>	<u>-</u>	<u>5/SW</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>Merica "G"</u>	<u>TSTM - SA</u>	<u>3</u>	<u>4,000</u>	<u>-</u>	<u>5/S</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>

Breathing zone concentrations are  
taken at approximately  
10' above the tank hatch.

GAUGE METHODS

M = daily manual gauge  
L = DACT readout for production  
A = automatic gauge reading

FIELD RECOVERY METHODS:

P = primary  
W = warning  
L = tertiary  
S = secondary

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# NAME/TIME: James A. Head-Area Sup'l HYDROGEN SULFIDE SURVEY

DATE: Oct 17, 1986

FIELD AREA: Monument Sub Area (Heller Area)

FIELD AREA OR FIELD INSTALLATION	FORMATION OR ZONE	OIL PRODUCTION (bpd)	H2S CONCENTRATION TANK HATCH (ppm)	H2S CONCENTRATION BREATHING ZONE (ppm)	WIND SPEED DIRECTION (mph)	GAUGE RECOVERY METHOD	FIELD RECOVERY	VAPOR RECOVERY	LACT TEST	WIND ROCK	WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
Monstate	E-SA-Y-2R-4	2	0	—	3/5	M	P	No	No	Yes	Yes	No
Yates	Shut In	—	—	—	—	—	—	—	—	—	—	—
Marrow	1	0	—	5/5	M	P	No	No	No	No	No	No
W.W.	Atoke	75M	0	—	5/5	M	P	No	No	No	No	No
N.M. DD St. Con.	Penn.	4	0	—	3/3M	M	P	No	No	No	No	No
N.M. DF St. Con.	Morrow	10 tanks	—	—	—	—	—	—	—	—	—	—
N.M. DF St. Con.	Morrow	2	0	—	3/5M	M	P	No	No	No	No	No
N.M. DF St. Con.	Morrow	2	0	—	3/5M	M	P	No	No	No	No	No

Reporting zone concentrations are  
based on approximately 10% above the tank batch.

GAUGE METHOD

M = daily manual gauge  
L = LACT reading for production  
A = automatic gauge system

FIELD RECOVERY METHOD:

P = primary  
W = witness  
T = tertiary  
A = automated

# NAME: Tower A, Head-Area Sub HYDROGEN SULFIDE SURVEY

FIELD AREA: Monument Sub Area (Hobbs Area)

DATE: Oct. 17/1986



FIELD AREA TANK BATTERY OR PIPE INSTALLATION	FORMATION ON ZONE	OIL PRODUCTION (bpd)	H2S CONCENTRATION TANK MATE (ppm)	H2S CONCENTRATION BREATHING ZONE (ppm)	WIND SPEED DIRECTION (mph)	GAUGE METHOD	FIELD RECOVERY		VAPOR RECOVERY	LAST TANK STOCK	WIND WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
							NO.	YES				
N.M. E. St. (N.M.)	Ebo-E-SA	56	16,000	—	3/5	M	P	No	No	Yes	Yes	Yes
N.M. E. St. (N.M.)	E - SA	61	2,200	—	3/5	M	P	No	No	Yes	Yes	Yes
N.M. E. State	E - SA	160	20,000	—	3/5	M	P	No	No	Yes	Yes	Yes
N.M. E. State	E - SA	1	0	—	3/5	M	P	No	No	Yes	Yes	No
N.M. J. State	E - SA	4.5	120	—	3/5	M	P	No	No	Yes	Yes	No
N.M. K. State	E - SA	737M	0	—	2/SE	M	P	No	No	No	No	No
Wolfscamp	*19	0	—	5/5	M	P	No	No	No	No	No	No
E - SA	31	10,000	—	2/5	M	P	No	No	Yes	Yes	Yes	No
T.R. Phillips			*	WELL PRODUCED 1 day per mo.								

Breathing zone concentrations are  
based on approximately  
10% above the tank level.

GAUGE METHODS:

M = daily manual gauge  
LACI reading for production  
A = automatic gauge reading

FIELD RECOVERY METHOD:

P = primary  
W = waterline  
V = venturi  
S = steamline

Interim, Tamak Head Area Report HYDROGEN SULFIDE SURVEY

Monument Sub Area (Habbs Area)

Oct. 17, 1986

DATE:

FIELD AREA:	VAPOR GAUGING ON FIELD INSTALLATION	FORMATION ON ZONE	PRODUCTION RATE Level	H2S CONCENTRATION TANK HATCH (ppm)	H2S CONCENTRATION MEASURING ZONE (ppm)	WIND SPEED DIRECTION (mph)	GAUGE METHOD	VAPOR RECOVERY METHOD	VAPOR RECOVERY	LACT TEST	WIND ROCK SIGN	RESPIRATORY PROTECTION FOR GAUGING	DATE:	
													Oct. 17, 1986	
E.H. Phillips 13	Winkerd & Tabb	15	0	-	3/5	N	P	No	No	Yes	No	No		
Delaware	1	0	-	1/5E	M	W	No	No	No	No	No	Yes		
Delaware	1	0	-	1/5E	M	W	No	No	No	No	No	Yes		
Welfamps	3	0	-	1/5W	M	P	No	No	No	No	No	No		
Morrow	75M	0	-	2/5	M	P	No	No	No	No	No	No		
Salt Mountain	Delaware	20	0	-	2/3	M	P	No	No	Yes	No	No		
Salt Mountain	Delaware	9	*Commingled	Tank	1/2	M	P	No	No	No	No	No		
Salt Mountain	Delaware	36	-	0%	M	P	No	No	No	No	No	No		
State Com.	Strawn	.5	0	-	0%	M	P	No	No	No	No	No		

Reporting vapor concentrations are  
based on approximately 10' above the tank hatch.

GAUGE METHOD

No = daily manual gauge  
L = LACT reading for production  
A = automatic gauge system

FIELD RECOVERY METHOD:

P = primary  
W = wiper  
T = tertiary  
B = bromine

**TIME: 10:00 A.M. - 1:00 P.M.**  
**LOCATION: Jones A. Head-Area Super HYDROGEN SULFIDE SURVEY**

DATE: Oct. 17, 1986

FIELD AREA: **Monroe & Sub Area (Habber Area)**

FIELD AREA:	NAME	FORMATION OR ZONE	PRODUCTION (bpd)	H2S CONCENTRATION TANK HATCH (ppm)	H2S CONCENTRATION BREATHING ZONE (ppm)	WIND SPEED (mph)	GAUGE METHOD	FIELD RECOVERY METHOD	VAPOR RECOVERY METHOD	LAST TEST	WIND WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
	<b>Saunders Red CT</b>	Ex-SA	105	4,300	—	4/5	M	P	No	No	No	No
	<b>Bone Spring</b>	3	0	—	0	1/2	M	P	No	Yes	Yes	Yes
	<b>Skaggs Ferry Pump Unit</b>	Ex-SA	104	15,000	—	4/5	M	P	No	Yes	No	No
	<b>Produced Water</b>	—	—	3,500	—	4/5	M	P	No	Yes	Yes	Yes
	<b>Skelly D. State</b>	Ex-SA	22	3,600	—	3/5	M	P	No	Yes	Yes	Yes
	<b>Skelly E. State</b>	Ex-SA	21	4,850	—	4/5w	M	P	No	Yes	Yes	Yes
	<b>Skelly F. State</b>	Ex-SA	6	100	—	3/5	M	P	No	Yes	Yes	Yes

RECORDING RATE CONVENTIONS: 0.0  
1.0 = 100% reading for production  
10.0 = above the tank hatch.

GAUGE METHOD

0 = daily manual gauge  
1 = LACTI readout for production  
2 = automatic gauge readout

FIELD RECOVERY METHOD:

P = primary  
W = witness  
L = LACTI readout for production  
A = automatic gauge readout

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# Toro Aked-Area Spur. HYDROGEN SULFIDE SURVEY

DATE: Oct. 17, 1986

FIELD AREA: Monument Sab Area (Habbs Area)

FIELD AREA: <u>Monument Sab Area (Habbs Area)</u>	DATE: Oct. 17, 1986											
NAME OF TANK OR FIELD INSTALLATION	FORMATION OR ZONE	ON PRODUCTION (ppm)	H <sub>2</sub> S CONCENTRATION IN TANK WASH (ppm)	H <sub>2</sub> S CONCENTRATION IN BREATHING ZONE (ppm)	WIND SPEED (mph)	GAUGE RECOVERY METHOD	FIELD VAPOR RECOVERY	VAPOR RECOVERY (%)	WIND DIRECTION (mph)	WIND BACK	WIND SIGN	RISPIRATORY PROTECTION FOR GAUGING
<u>State "A"</u>	<u>Wolfcamp</u>	<u>6</u>	<u>10</u>	<u>-</u>	<u>4/5</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>No</u>	<u>No</u>	<u>No</u>
<u>State "E"</u>	<u>Gr-SA</u>	<u>28</u>	<u>10,000</u>	<u>-</u>	<u>3/5</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>State "H"</u>	<u>Gr-SA</u>	<u>9</u>	<u>300</u>	<u>-</u>	<u>3/5</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>State "I"</u>	<u>Paddock</u>	<u>22</u>	<u>45,000</u>	<u>-</u>	<u>3/5</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>State "J"</u>	<u>Gr-SA</u>	<u>7</u>	<u>1,000</u>	<u>-</u>	<u>4/5</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>No</u>
<u>State "K" GORE-A</u>	<u>Morrow</u>	<u>187M</u>	<u>0</u>	<u>-</u>	<u>15/5W</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>No</u>	<u>No</u>	<u>No</u>
<u>Texas Petrol Ser.</u>	<u>Morrow</u>	<u>Skid 2</u>	<u>0</u>	<u>-</u>	<u>15/5W</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>No</u>
<u>Texaco Gas, Spur.</u>	<u>Strawn</u>	<u>1</u>	<u>0</u>	<u>-</u>	<u>15/5W</u>	<u>M</u>	<u>P</u>	<u>No</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>No</u>

Drilling time concentrations are  
approximately 10 times the tank back.

GAUGE METHOD

M = daily manual gauge  
L = LACTI portable for production  
A = automatic gauge record

FIELD RECOVERY METHOD:

P = primary  
W = secondary  
C = tertiary  
S = streamlined

# WILMINGTON, TOMBSTONE FIELD AREA SURVEY

## HYDROGEN SULFIDE SURVEY

DATE, Oct. 17, 1986.

### FIELD AREA: Monument Sub Area (Hobbs Area)

FIELD AREA: <u>Monument Sub Area (Hobbs Area)</u>	NAME OF TANK OR FIELD INSTALLATION	FORMATION ON ZONE	PRODUCTION (bpd)	$H_2S$ CONCENTRATION		WELL GAUGE READING (inpsi)	FIELD GAUGE RECOVERY METHOD	VAPOR RECOVERY	LACTIC ACID TEST	WARNING SIGN	RESPIRATORY PROTECTION FOR GAUGING
				TANK HATCH (ppm)	BEARING ZONE (ppm)						
<u>Land</u>	<u>Marrow</u>	-	No tanks								
	Penn.	-	No Tanks								
K. Van Etten	57-SA-3 1/2 in Talib	22	6,500	-	3/5	M	P	No	Yes	Yes	Yes
C. H. Veir A	13116-B-Table Orchard-Alto	210	800	-	2/4	M	P	No	Yes	Yes	Yes
C. H. Veir B	12116-B-Table Orchard-Alto	22	650	-	2/4	M	P	No	Yes	Yes	Yes
M. O. Veir 12	12116-B-Table Orchard-Alto	33	5	-	2/4	M	P	No	Yes	Yes	Yes
Wm. Veir - T-2, #1	57-SA	1	0	-	4/5	M	P	No	Yes	No	No
Wm. Veir - T-2, #2	57-SA	1	0	-	4/5	M	P	No	Yes	No	No

Bauding zone concentrations are taken at approximately 10' above the tank base.

GAUGE METHOD:

M = daily manual gauge  
P = LACTI reading for production  
A = electronic gauge reading

FIELD RECOVERY METHOD:

P = primary  
W = witness  
T = test  
E = estimated

WILMINGTON, JAMES A. Head-Area SULFHYDROGEN-SULFIDE SURVEY

Region Area: **Monument Sub Area (Hoobis Area)**

Oct. 17, 1946



**M a d a y manual gauge  
FACT record for production  
of automatic gauge reading**

### **ratio recovery method**

הַיְלָדִים

Worthington's Commercial  
Habits in Advertising

Gauge method

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APPROVE THE

MINES AND GAS SAFETY COMMISSION

FOR THE STATE OF WASHINGTON

RE: APPROVAL OF

Opp

R

## ( Subpart T—Gassy Mines

Sec.

57.21000 Application.

### Mine Classification

57.21001 Classification criteria.

57.21002 Classification during mine reclamation.

### Fire Prevention and Control

57.21010 Smoking.

57.21011 Use of open flames.

57.21012 Testing for methane prior to welding,  
cutting, or soldering.

57.21013 Unsafe methane levels for welding, cutting,  
or soldering.

### Ventilation

57.21020 Main fan installation and construction.

57.21021 Main fan operation and inspection.

57.21022 Separation of main intake and return air.

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**§ 57.21000 Application.**

Gassy mines shall be operated in accordance with all mandatory standards in this part. Such mines shall also be operated in accordance with the mandatory standards in this section. The standards in this subpart apply only to underground operations.

**Mine Classification**

**§ 57.21001 Classification criteria.**

A mine shall be deemed gassy, and thereafter operated as a gassy mine, if—

- (a) The State in which the mine is located classifies the mine as gassy; or
- (b) Flammable gas emanating from the orebody or the strata surrounding the orebody has been ignited in the mine; or
- (c) A concentration of 0.25 percent or more, by air analysis, of flammable gas emanating only from the orebody or the strata surrounding the orebody has been detected not less than 12 inches from the back, face, or ribs in any open workings; or
- (d) The mine is connected to a gassy mine.

**§ 57.21002 Classification during mine reclamation.**

Flammable gases detected only while unwatering mines or flooded sections of mines or during other mine reclamation operations shall not be used to permanently classify a mine gassy. During such periods that any flammable gas is

present in the mine, the affected areas of the mine shall be operated in accordance with appropriate standards in this subpart.

#### **Fire Prevention and Control**

##### **§ 57.21010 Smoking.**

Persons shall not smoke or carry smoking materials, matches, or lighters underground. The operator shall institute a reasonable program to ensure that persons entering the mine do not carry smoking materials, matches, or lighters.

##### **§ 57.21011 Use of open flames.**

Except when necessary for welding or cutting, open flames shall not be used in other than fresh air or in places where flammable gases are present or may enter the air current.

##### **§ 57.21012 Testing for methane prior to welding, cutting, or soldering.**

Immediately before and continuously during welding or cutting with an arc or open flame or soldering with an open flame, in other than fresh air, or in places where methane is present or may enter the air current, a competent person shall test for methane with a device approved by the Secretary for detecting methane.

##### **§ 57.21013 Unsafe methane levels for welding, cutting, or soldering.**

Welding or cutting with an arc or open flame or soldering with an open flame shall not be performed in atmospheres containing more than 1 percent of methane as determined by a device approved by the Secretary for detecting methane.

## **Ventilation**

### **§ 57.21020 Main fan installation and construction.**

Main fans shall be—

- (a) Installed on the surface;
- (b) Installed to permit prompt reversal of air-flow;
- (c) Powered electrically;
- (d) Installed in noncombustible housing provided with noncombustible air ducts;
- (e) Offset not less than 15 feet from the nearest side of the mine opening to which the fan is connected. The fan installation shall be equipped with explosion-doors or a weak-wall having an area at least equivalent to the cross-sectional area of the airway. Such doors or weak-wall shall be in direct line with possible explosion forces; and
- (f) Provided with an automatic signal device to give warning or alarm should the fan system malfunction. The signal device shall be so located that it can be seen or heard by a responsible person at all times when persons are underground.

### **§ 57.21021 Main fan operation and inspection.**

Main fans shall be—

- (a) Operated continuously while persons are underground except when stopped or slowed down for fan maintenance and/or fan adjustments and related ventilation system adjustments and compliance is made with the provisions of mandatory standard 57.21024;
- (b) Provided with pressure-recording gages which shall be examined daily for good operating condition. The charts of such gages shall be changed after completing one revolution; and
- (c) Inspected daily and logs kept of such inspections and of fan maintenance. Charts and logs shall be retained for a minimum of one year.

Such records and charts shall be available for inspection by the Secretary or his duly authorized representative.

(Approved by the Office of Management and Budget under OMB control number 1219-0030)

**§ 57.21022 Separation of main intake and return air.**

The main intake and return air currents in mines shall be in separate shafts, slopes, or drifts, except that during shaft or slope development, vent tubing may be used in the same opening. Until a second opening to the surface can be provided, single shafts used for intake and return air shall be provided with a curtain wall or partition.

**§ 57.21023 Separation of intake and return air in single shafts.**

When single shafts are used for intake and return, the curtain wall or partition shall be constructed of reinforced concrete or equivalent and provided with pressure relief devices.

**§ 57.21024 Failure of main fan.**

(a) At mines where a single main fan is used and such fan stops, or at mines where multiple main fans are used and all such fans stop, the operator shall take the following immediate action:

(1) Withdraw all persons from the affected active workings.

(2) Deenergize the power in affected active workings.

(3) Withdraw all persons from the mine when a 1.0 percent concentration of methane in air is measured in any active working.

If ventilation has been interrupted for more than 15 minutes, all working places and active workings where methane may accumulate shall be examined by a competent person(s). The power

shall not be restored or persons permitted to re-enter the affected active workings until the competent person(s) has determined the methane concentration in such active workings is less than 1.0 percent.

(b) At mines where multiple main fans are used and one or more but not all fans stop, and air flow in intake and return air courses is maintained, the operator shall take the following immediate action:

(1) Monitor the air in all active workings for methane content.

(2) Withdraw all persons from, and deenergize the power in, all active workings when a 1.0 percent concentration of methane in the air is measured.

(3) Comply with all related standards in this subpart.

**§ 57.21025 Failure of mine ventilation.**

When there has been a failure of mine ventilation other than a failure of a main fan as described in standard 57.21024, the operator shall take the following immediate actions:

(a) Withdraw all persons from the affected active workings.

(b) Deenergize the power in affected active workings. The power shall not be restored or persons permitted to reenter the affected active workings until a competent person(s) has determined that the methane concentration in such active workings is less than 1.0 percent.

**§ 57.21027 Reentry after shutdown of main fans.**

When the main fan or fans have been shut down with all persons out of the mine, no person, other than those competent to examine the mine, or other authorized persons, shall go underground until the fans have been started and

the mine is examined for methane and other hazards and declared safe.

**§ 57.21028 Booster fan operation.**

Booster fans shall be—

- (a) Operated by permissible drive units maintained in permissible condition;
- (b) Operated only in air containing less than 1.0 percent methane; and
- (c) Kept in continuous operation when persons are in active workings of the mine affected by such fans.

**§ 57.21029 Booster fan safety devices.**

Booster fans shall be—

- (a) Provided with an automatic signal device to give warning or alarm should the fan system malfunction. The signal device shall be so located that it can be seen or heard by a responsible person at all times when persons are underground;
- (b) Equipped with a device that automatically deenergizes the power in affected active workings should the fan system malfunction;
- (c) Provided with air locks, the doors of which open automatically should the fan stop; and
- (d) Equipped with two sets of controls capable of starting, stopping, and reversing the fans. One set of controls shall be located at the fans. A second set of controls shall be at another location remote from the fans.

**§ 57.21030 Auxiliary fan requirements.**

Auxiliary fans shall be of a permissible type, maintained in permissible condition, and so located and operated to avoid recirculation of air. Auxiliary fans shall not be used to ventilate any working place during the interruption of normal mine ventilation. If the auxiliary fan is stopped or fails, the electrical equipment in the affected area

shall be stopped and the power disconnected at the power source until ventilation in the affected area is restored. Tests shall be made at the fan for methane before auxiliary fans are started. The air passing over or through auxiliary fan units shall not exceed 1.0 percent of methane.

**§ 57.21031 Auxiliary fan inspection.**

Auxiliary fans shall be inspected by competent persons at least twice each operating shift.

**§ 57.21033 Minimum air flow in active areas.**

The volume and velocity of the current of air coursed through all active areas shall be sufficient to dilute, render harmless, and carry away methane smoke, fumes, and dust.

**§ 57.21034 Minimum air flow through last open crosscut and other ventilation openings near the face.**

The quantity of air coursed through the last open crosscut in pairs or sets of entries, or through other ventilation openings nearest the face, shall be at least 6,000 cubic feet per minute, or 9,000 cubic feet per minute in longwall and continuous miner sections.

**§ 57.21035 Weekly air flow measurements.**

At least once each week, a qualified person shall measure the volume of air entering the main intakes and leaving the main returns, the volume of the intake and return of each split, and the volume through the last open crosscuts or other ventilation openings nearest the active faces. Records of such measurements shall be kept in a book on the surface.

(Approved by the Office of Management and Budget under OMB control number 1219-0031)

**§ 57.21036 Battery-charging stations and transformer stations.**

Permanently installed battery-charging stations and transformer stations in combustible areas shall be ventilated by separate splits of air conducted directly to return air courses. Permanently installed means stations that are intended to exist for one year or more.

**§ 57.21038 Changes in ventilation.**

Changes in ventilation that materially affect the main air current or any split thereof and may affect the safety of persons in the mine shall be made only when the mine is idle. Only those persons engaged in making such changes shall be permitted in the mine during the change. Power shall be removed from the areas affected by the change before work starts and not restored until the effect of the change has been ascertained and the affected areas determined to be safe by a qualified person.

**§ 57.21039 Actions at 1.0 percent methane.**

If methane gas in excess of 1.0 percent is detected in the air not less than 12 inches from the back, face, or rib of an underground working place or places, adjustments shall be made in the ventilation immediately so that the concentration of methane gas in such air is reduced to 1.0 percent or less. While such changes or adjustments are underway and until they have been achieved, power to electric equipment located in such place shall be cut off, no other work shall be permitted in such place, and due precautions shall be carried out under the direction of the operator or his agent so as not to endanger other areas of the mine.

**§ 57.21040 Actions at 1.5 percent methane.**

If 1.5 percent or higher concentration of methane gas is present in air returning from an underground working place or places, or is present in the air not less than 12 inches from the back, face, or rib of an underground working place, all persons other than those persons referred to in section 104(c) of the Federal Mine Safety and Health Act of 1977 shall be withdrawn from the area of the mine endangered by such methane gas until the concentration of methane in such areas is reduced to 1.0 percent or less.

**§ 57.21041 Air passing through unsealed abandoned areas.**

Air that has passed by an opening of any unsealed abandoned area and contains 0.25 percent or more of methane shall be coursed directly to a return airway. Examinations of such air shall be conducted during the preshift examinations required by § 57.21059.

**§ 57.21042 Air passing through abandoned panels or inaccessible or unsafe areas.**

Air that has passed through an abandoned panel or area which is inaccessible or unsafe for inspection shall not be used to ventilate any working place in such mine. No air which has been used to ventilate an area from which the pillars have been removed shall be used to ventilate any working place in such mine, except that such air, if it does not contain 0.25 volume per centum or more of methane, may be used to ventilate enough advancing working places immediately adjacent to the line of retreat to maintain an orderly sequence of pillar recovery on a set of entries.

**§ 57.21043 Abandoned areas.**

Abandoned areas shall be sealed or ventilated; areas that are not sealed shall be barricaded and posted against unauthorized entry.

**§ 57.21044 Seal construction.**

Seals shall be of substantial construction. Exposed surfaces shall be made of fire-resistant material or, if the commodity mined is combustible, seals shall be made of incombustible material.

**§ 57.21045 Provisions for sampling air behind seals.**

One or more seals of every sealed area shall be fitted with a pipe and a valve or cap to permit sampling of the atmosphere and measurement of the pressure behind such seals.

**§ 57.21046 Crosscut intervals.**

Crosscuts shall be made at intervals not in excess of 100 feet between entries and between rooms.

**§ 57.21048 Line brattice.**

Line brattice or other suitable devices shall be installed from the last open crosscut to a point near the face to assure positive air flow to the face of every active underground working place, unless the Secretary or his authorized representative permits an exception to this requirement.

**§ 57.21049 Brattice cloth flame-resistance.**

Brattice cloth shall be of flame-resistant material.

**§ 57.21050 Repair of damaged brattices.**

Damaged brattices shall be repaired promptly.

**§ 57.21051 Crosscuts before abandonment.**

Crosscuts shall be provided where practicable at or within eighteen feet of the face of drifts, en-

tries, and rooms before the workings are abandoned in any unsealed area of the mine. When crosscuts are not practicable, line brattice or other suitable means of ventilating shall be provided to the drifts, entries, or rooms.

**§ 57.21052 Entries and rooms beyond the last open crosscut.**

Entries or rooms shall not be started off entries beyond the last open crosscuts, except that room necks and entries not to exceed 18 feet in depth may be turned off entries beyond the last open crosscuts if such room necks or entries are kept free of accumulations of methane by use of line brattice or other adequate means.

**§ 57.21053 Stoppings.**

Stoppings in crosscuts between intake and return airways, on entries other than room entries, shall be built of solid, substantial material; exposed surfaces shall be made of fire-resistant material or, if the material mined is combustible, stoppings shall be made of incombustible material.

**§ 57.21055 Air locks, overcasts, and undercasts.**

The main ventilation shall be so arranged by means of air locks, overcasts, or undercasts that the passage of trips or persons does not cause interruptions of air currents. Where air locks are impracticable, single doors may be used if they are attended constantly while the areas of the mine affected by the doors are being worked, unless they are operated mechanically or are self-closing.

**§ 57.21056 Ventilation of air locks.**

Air locks shall be ventilated sufficiently to prevent accumulations of flammable gas inside the locks.

**§ 57.21057 Air doors.**

Doors which control the flow of air by being closed shall be kept closed, except when persons or equipment are passing through such doorways. Doors shall be plainly marked to indicate whether they shall be closed or open for ventilation control purposes.

**§ 57.21058 Overcasts and undercast construction.**

Overcasts and undercasts shall be—

- (a) Constructed tightly of incombustible material;
- (b) Of sufficient strength to withstand possible falls from the back; and
- (c) Kept clear of obstruction.

**§ 57.21059 Preshift examinations.**

Preshift examinations shall be made of all working areas by qualified persons within 3 hours before any workers, other than the examiners, enter the mine.

**§ 57.21061 Entry to dangerous areas.**

Only qualified examiners and persons authorized to correct the dangerous conditions shall enter places or areas where danger signs are posted.

**§ 57.21062 Danger signs.**

Danger signs shall not be removed until the dangerous conditions have been corrected.

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**§ 57.21064 Permissible testing devices.**

Each operator shall use permissible devices accepted by the Secretary of Labor for detecting flammable gases, oxygen deficiency, carbon monoxide, and other air contaminants. Such permissible devices shall be provided and maintained in serviceable and permissible condition. In the detection of flammable gases, a permissible flame safety lamp may be used only as a supplementary testing device.

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**§ 57.21065 Examination for hazardous conditions and testing for methane and carbon monoxide.**

At intervals not greater than seven days, the mine foreman (or other competent person designated by the mine foreman) shall examine for hazardous conditions and for compliance with health and safety standards, and shall test for methane and carbon monoxide. The tests shall be made with approved devices at the following locations:

- (a) In the return of each split where it enters the main return.
- (b) Adjacent to retreat areas, if accessible.
- (c) At seals.
- (d) In the main return.
- (e) In at least one entry of each intake and return airway.
- (f) In idle workings.
- (g) In unsealed abandoned workings, as conditions permit.

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**§ 57.21066 Hazardous condition reports.**

The mine foreman or other designated official shall read and countersign promptly the reports of the required examinations made by competent persons. Where such reports disclose hazardous conditions, the affected employees shall be so informed and such conditions shall be corrected

promptly. If such conditions create an imminent danger, the operator shall withdraw all persons from, or prevent, any person from entering, as the case may be, the area affected by such conditions, except those persons referred to in section 104(c) of the Federal Mine Safety and Health Act of 1977 until such danger is abated. A responsible mine official at the next highest level of authority, if such level exists, shall also read and countersign at least weekly the required reports to ensure that proper inspections have been made and remedial action taken.

**§ 57.21067 Mechanical ventilation.**

All gassy mines shall be ventilated mechanically.

**§ 57.21068 Air flow in intake and return courses.**

Airflow shall be maintained in all intake and return air courses of a mine. When multiple main fans are used, such ventilation systems shall not develop neutral areas (areas without perceptible air movement).

**§ 57.21069 Doors on main fans.**

In mines ventilated by a combination of multiple blowing or multiple exhausting main fans, each main fan installation shall be equipped with noncombustible doors designed and positioned so that, in the event of failure of a main fan, these doors will automatically close to prevent air reversal through the fan. The doors shall be located so that they are not in direct line with forces which would come out of the mine, should an explosion occur.

## **Equipment**

### **§ 57.21076 Diesel-powered equipment.**

Diesel-powered equipment shall not be taken into or operated in places where methane exceeds 1.0 percent at any point not less than 12 inches from the back, face, or rib.

### **§ 57.21077 Trolley wires.**

Trolley wires and trolley feeder wires shall be on intake air and shall not extend into the last open crosscut or other ventilation opening. Such wires shall be kept at least 150 feet from pillar recovery workings.

### **§ 57.21078 Permissible equipment.**

Only permissible equipment maintained in permissible condition shall be used beyond the last open crosscut or in places where dangerous quantities of flammable gases are present or may enter the air current.

### **§ 57.21079 Distribution boxes.**

Only permissible distribution boxes shall be used in working places and other places where 1 percent or more of methane may be present or may enter the air current.

### **§ 57.21080 Methane monitors.**

A methane monitoring device (methane monitor), approved by the Secretary of Labor, shall be installed and properly maintained on all continuous miners and longwall face equipment. The sensing unit of the methane monitor shall be positioned as close to the working face as practicable. When the concentration of methane is 1.0 percent or more, the monitor shall give a warning and deenergize the equipment automatically when the concentration reaches 1.5 percent. The methane monitor also shall de-energize such

equipment automatically when the monitor is not functioning properly.

### **Illumination**

#### **§ 57.21090 Permissible electric lamps.**

Only permissible electric lamps shall be used for portable illumination underground.

### **Explosives**

#### **§ 57.21095 Approval of explosives.**

Explosives not designated as permissible by the Bureau of Mines or the Mine Safety and Health Administration shall not be used in any underground gassy mine until the Bureau of Mines and State Inspector of Mines have given written approval for each such specific explosive to be used.

#### **§ 57.21096 Conditions of use.**

The Mine Safety and Health Administration and the State Inspector of Mines, in granting approval referred to in standard 57.21095, shall provide the operator with a written list of conditions for using the specific explosives covered by the approval and adapted to the mining operation.

#### **§ 57.21097 General requirements for blasting.**

Blasts in gassy mines shall be initiated electrically, and multiple-shot blasts shall be initiated only with millisecond-delay detonators. Permissible blasting units of capacity suitable for the number of holes in a round to be blasted shall be used unless the round is fired from the surface when all persons are out of the mine.

#### **§ 57.21098 Stemming boreholes.**

Boreholes shall be stemmed as prescribed for the explosives used.

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§ 57.21099 Examination for methane when blasting on shift.

When blasting on shift, examinations for methane shall be made immediately before firing each shot or round, and again before other work is performed. Examinations shall be made by competent persons with devices approved by the Secretary for detecting methane.

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§ 57.21100 Methane limits for blasting.

Shots or rounds shall not be fired in places where 1.0 percent or more of methane is present at a point no less than 12 inches from the back, face, or rib. Tests to determine the presence of methane shall be made by a competent person with devices approved by the Secretary for detecting methane.

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§ 57.21101 Firing shots and rounds.

Shots and rounds shall be fired by competent persons.

\* U.S. GOVERNMENT PRINTING OFFICE: 1985-461-566:36449

*Lease file*

May 5, 1986

Bureau of Land Management  
P. O. Box 1397  
Roswell, New Mexico 88201

Attention: Mr. Les Babyak

RE: 318002 - FORTY NINER RIDGE UNIT  
EDDY COUNTY, NEW MEXICO  
Request for Approval of Commercial  
Well Determination

Gentlemen:

Well No. 1 on the subject unit was recompleted on August 6, 1984 from Cherry Canyon perforations between the depths of 5422 and 5952 feet. The well has produced approximately 26,000 barrels of oil to date and is currently producing approximately 50 BOPD. This letter will furnish the information required by your office to approve our determination that the Cherry Canyon recompletion is capable of producing unitized substances in paying quantities in accordance with the unit agreement.

Attached is a neutron density log of the producing formation. The following is a tabulation of monthly production from the Cherry Canyon formation:

MONTH	BO	MCF	BW
Aug. 1984	632	0	297
Sep. 1984	862	360	330
Oct. 1984	1009	329	950
Nov. 1984	1271	395	1080
Dec. 1984	1472	423	1488
Jan. 1985	1517	424	2175
Feb. 1985	1041	426	3080
Mar. 1985	898	443	2694
Apr. 1985	732	400	1792
May 1985	1269	340	3004
June 1985	1349	423	1941
July 1985	1322	553	3237
Aug. 1985	1294	538	3019
Sep. 1985	1259	521	2675
Oct. 1985	974	536	1240
Nov. 1985	1323	512	4977
Dec. 1985	877	261	718
Jan. 1986	1365	210	6246

**CONFIDENTIAL**

May 5, 1986

The following is a volumetric calculation of the initial oil in place:

$$N = 7758 \times A + H \times \phi \times (1-Sw)/Boi \text{ (RF).}$$

$$N = 7758 \times 40 \times 48 \times .14 (.37)/1.23 \text{ (RF).}$$

$$N = 627,301 \text{ STB (.14) est.}$$

$$N = 87,822 \text{ STB.}$$

The following additional information concerning the Cherry Canyon recompletion is furnished as required:

1. Oil Price: \$14.10.
2. Percent Net W.I.: 84.07526%.
3. Operating Cost/Month: \$7,000.00.
4. Production, Ad-valorem Tax: .96% all revenue.  
Severance Tax: 3.75% oil/cond. and \$0.157/MCF.
5. Windfall Profit Tax: Not applicable.
6. Cost to Drill: \$300,000 (est.).
7. BHP: 2425 extrapolated from DST.
8. BHT: 105° from DST.
9. Oil Formation Volume Factor: 1.23 from DST and Figure 70 of the "Properties of Petroleum Reservoir Fluids" by Emil J. Burick.
10. API Gravity: 37.5°.
11. Well Depth: 6050 feet.
12. Recovery Factor: .14 est.
13. Porosity: Average 14%.
14. Water Saturation: Average 63%.
15. Net Pay Thickness: 48.
16. Reservoir Mechanism: Solution Gas Drive (est.).

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Bureau of Land Management

-3-

May 5, 1986

Texaco believes the above information clearly reflects a well capable of producing unitized substances in paying quantities. Please advise your approval of this determination.

Yours very truly,

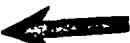
S. L. Chandler  
Land Manager  
Texaco Inc.

By \_\_\_\_\_  
B. E. Hellman  
For Texaco Producing Inc.

BEH-BW

Attachment

cc: Commissioner of Public Lands  
P. O. Box 1148  
Santa Fe, New Mexico 87504-1148  
Attention: Mr. Floyd O. Prando  
Director Oil and Gas Division

bcc: RSL  
LJS   
File  
R.F.

**CONFIDENTIAL**



TELECO

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Opp

DATE: March 21, 1986

TO: Mr. Alan R. McDaniel (RDT)  
Midland, Texas

FROM: Joe E. King  
Hobbs, New Mexico

SUBJECT: GOV - GOVERNMENT RELATIONS  
DEPARTMENT OF INTERIOR  
DELAWARE PARTICIPATING UNIT  
FORTY NINER RIDGE UNIT  
EDDY COUNTY, NEW MEXICO

Attached is a copy of the Unit Agreement, the Unit Operating Agreement, the well histories of both Forty Niner Ridge wells, monthly production, well logs of producing interval, economic and reservoir data, volumetric calculations, a production curve for well No. 1, and an economic case for a well in the Forty Niner Ridge Unit (Exhibits 1-10). This information was requested as per conversation between Mr. D. J. Steinnerd and Mr. B. E. Hellman. BLM has requested a new participating area be established, if applicable, for the Forty Niner Ridge Delaware.

We reviewed both the Delaware and Bone Springs. No participating area should be established for the Bone Springs. Well No. 2 had the highest cumulative production with a production of 14,385 BO. Even if all this oil had been produced instantaneously, it would not pay out the cost to drill a Bone Springs well. However, the Delaware formation has potential for further development. Based on the results of well No. 1, future wells can be profitable even at a price of \$14.10/bbl (see profit Exhibit 10). With an initial production of 48 barrels of oil/day, a decline of 16.87%/year and a drilling cost of \$350,000 including pumping equipment. Profit yielded the following economics:

PWI	1.93
Payout, Years	3.4
Present Worth Net Profit, \$	121,192
DCFROI, %	42.5

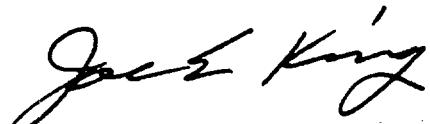
We recommended the participating area consist of the same acreage as the Morrow participating area if it can be supported with geological data. (i.e.: structure and isopach maps etc.). However, a factor which could affect the participating area is the potash mining in this area. One drilling well has been

Mr. Alan R. McDaniel (RDT) - 2 -

March 21, 1986

turned down already, due to the potash and it could have a bearing on further development.

Note that a letter requesting 60 days extension has been written to the BLM. However, to expedite matters regarding a Delaware participation area, correspondence or questions should be sent to the attention of Les Babyak, Bureau of Land Management, P. O. Box 1397, Roswell, New Mexico.



PWS:jm

Attachments

File

Chrono

## WELL HISTORIES

### FORTY NINER RIDGE UNIT WELL NO. 1

- 1.) Located Unit Letter J, 1980' FSL and FEL Section 16, T-23-S, R-30-E, Eddy County, New Mexico.
- 2.) Completed in November 10, 1973, in Morrow Sand for CAOF 3,702 MCFPD. Cumulative Morrow production at abandonment on October 1, 1981, was 868,095 MCF.
- 3.) Recompleted into Wolfcamp in June, 1982, proved to be non-productive.
- 4.) Successfully completed in Bone Springs pay June, 1982. Initial production 37 BOPD and 250 MCFPD. Stabilized at 12 BOPD and 15 MCFPD June 27, 1982. Recompleted in August, 1984, cumulative production 2,744 BO.
- 5.) Recompleted in Delaware Cherry Canyon August, 1984, (through perfs. 5422, 24, 26, 28, 30, 32, 34, 36, 38, 40, 42, 44, 5769, 71, 73, 75, 85, 87, 5935, 37, 38, 43, 46, 49, and 5952). Initial production 128 BOPD, 267 BWPD and 19 MCF cumulative to January 1, 1986, was 19,101. Production in December, 1985, was 28 BOPD. 23 BWPD and 8 MCF.

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**WELL HISTORIES CONTINUED**

**FORTY NINER RIDGE WELL NO. 2**

- 1.) Located 1980' FNL and FEL, Section 21, T-23-S, R-30-E, Eddy County, New Mexico.
- 2.) Completed in 1974 as a Morrow producer CAOF 2492 MCFPD. Abandoned Morrow August, 1977, with a cumulative of 2,696 MCF.
- 3.) Recompleted into Bone Springs on September 1, 1979. Initial production October 19, 1977, was 11 BOPD, 46 MCFPD and 8 BWPD. Cumulative production January 1, 1986, was 14,385. Average production for December, 1985, was 5 BOPD, 3 BWPD and 11 MCF.

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**VOLUMETRIC RESERVES**

**$N = 7758 \times A + H \times \phi \times (1-S_w) / Bo_i \text{ (RF)}$**

**$N = 7758 \times 40 \times 48 \times .14 (.37) / 1.23 \text{ (RF)}$**

**$N = 627,301 \text{ STB (.14) est.}$**

**$N = 87,822 \text{ STB}$**

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**RESERVOIR DATA**

**From Well No. 1**

**1.) BHP - 2425 extrapolated from DST**

**2.) BHT - 105° from DST**

**3.) Oil Formation Volume (DST) Factor -**

**1.23 from DST and Figure 70 of the "Properties of Petroleum Reservoir Fluids" by Emil J. Burick**

**4.) API Gravity - 37.50**

**5.) Well Depth - 6050'**

**6.) Recovery Factor - .14 est.**

**7.) Porosity - Average 14%**

**8.) Water Saturation = Average 63%**

**9.) Net Pay Thickness = 48**

**10.) Reservoir Mechanism - Solution Gas Drive (est.)**

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ECONOMIC DATA FOR DRILLING A DELAWARE COMPLETION

1.) Oil Price - \$14.10

2.) % Net W.I. - 62.84937

3.) Operating Cost - 7000/MO

4.) Production, Ad-Valorem Tax .96% all Revenue  
Severance - 3.75% oil/cond and 15.7 ¢/MCF

5.) Windfall Profit Tax - not applicable - see Profit Exhibit 10

6.) Cost to Drill - 350,000 est.

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# PRODUCTION VS TIME

STATE: NEW MEXICO

FIELD: FORTY NINER RIDGE DELAWARE

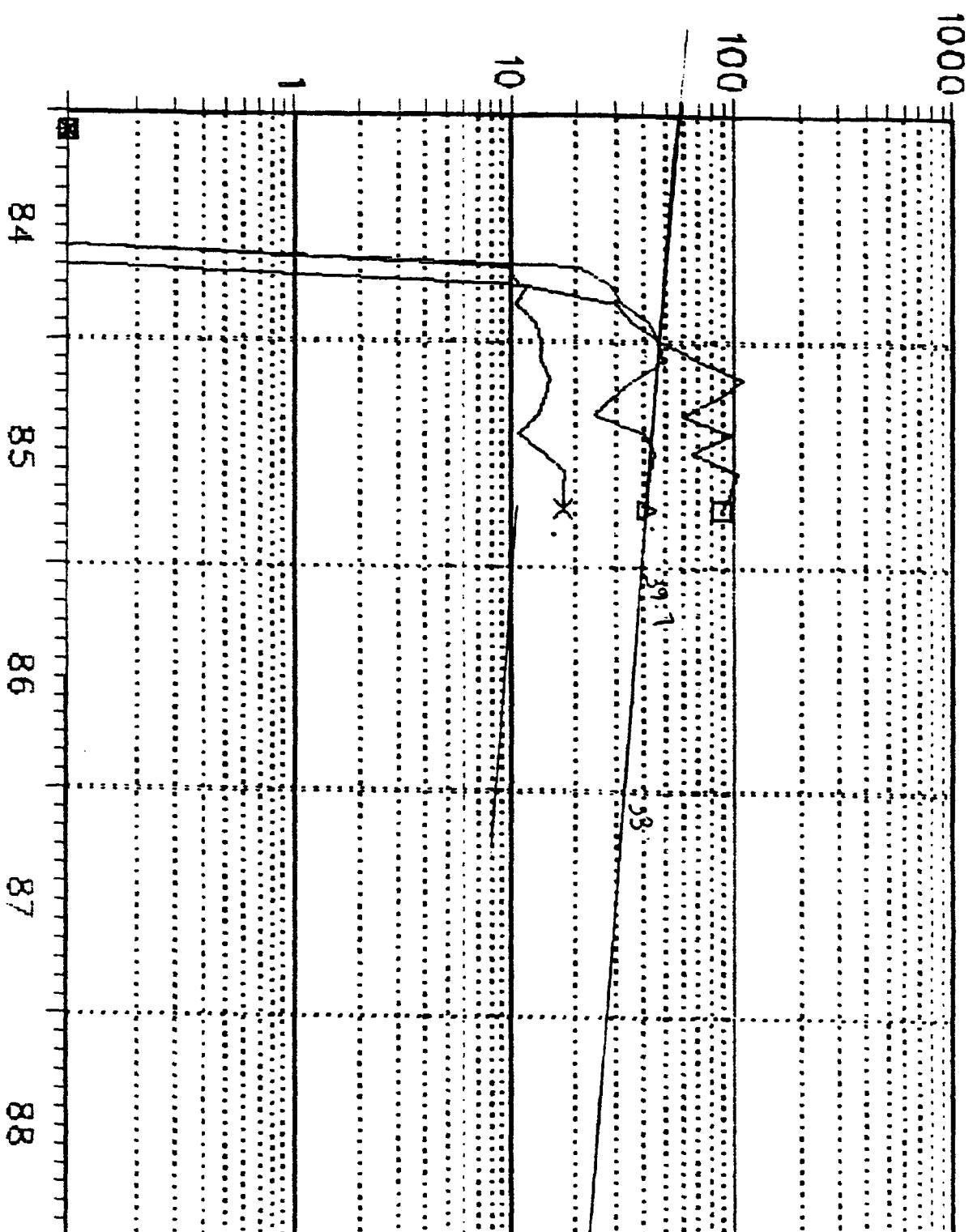
SPOT: J

PROPERTY: FORTY NINER RIDGE UNIT

PROPERTY NO: 238450

OPER.: TEXACO PRODUCING CO.

## PRODUCTION PER DAY



$$d = 16.92$$

13 MAR 86

△ CRUDE (BBLS)  
X GAS (MCF)  
□ WATER (BBLs)

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