Form 3160-5 (June 1990)

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

NM OIL CONT Drawer DD Artesia, NM 88210

CIST

FORM APPROVED

Budge	ŧ	Bureau	No.	10	04-013	35
_						

Expires: March 31, 1993

		. 1	1				
SUNDRY NOTICE	5. Lease Design	5. Lease Designation and Serial No. LC-029418 B 6. If Indian, Alottee or Tribe Name					
Do not use this form for proposals to	6. If Indian, Alot						
Use "APPLICATION	FOR PERMIT" for such pro	oposals					
SUBM	7. If Unit or CA,	7. If Unit or CA, Agreement Designation					
I. Type of Well: OIL GAS	8. Well Name a	8. Well Name and Number SKELLY UNIT					
2. Name of Operator		•					
TEXACO EXPLORA		141					
Address and Telephone No. P.O. BOX 730, HO	9. API Well No.	9. API Well No. 30 015 22484					
4. Location of Well (Footage, Sec., T., R., M., or Survey	10. Field and Po	10. Field and Pool, Exploratory Area					
Unit Letter : 2210 Feet From The SOUTH Line and 660 Feet From The				FREN SEVEN RIVERS			
EAST Line Section 23 Township 17S Range 31E				County or Parish, State EDDY , NEW MEXICO			
2. Check Appropriate	Box(s) To Indicate N	Nature of Notice,	Report, or Ot	her Data			
TYPE OF SUBMISSION			TYPE OF ACTIO	·			
	Abandor			Change of Plans			
⊠ Notice of Intent	☐ Recomp		Ļ	New Construction			
Subsequent Report	☐ Plugging☐ Casing F		L.	Non-Routine Fra Water Shut-Off	acturing		
	Altering	•	L	Conversion to In	jection		
Final Abandonment Notice	OTHER:	EXTEND TA ST	ATUS	Dispose Water	•		
			()	- late: Report results of multi ampletion or Recompletion	ple completion on Well		
Describe Proposed or Completed Operations (Clear directionally drilled, give subsurface locations and n					ed work. If well is		
Recent work has been carried out on the skelly Un Extended TA status is requested produing the resu							
1. Notify BLM 24 hours in advance of work.		France	5 - 1 (1984)				
2. MIRU. TOH with injection equipment.		FEB - 8	1.17		t		
3. TIH with tubing. Load hole with inhibitor fluid.		OH COP		÷ ",			
4. Re-test 5-1/2" casing from CIBP @ 2350' to s	urface with 500 psi. for 30 mi						
5. Re-classify well to TA status. TEPI witll submrequesting extended TA status on this well.	it pressure chart and subsequ		4				
					발		
	1						
14. I hereby certify that the foreigning is true and correct	/ - · · · -						
SIGNATURE	=	ineering Assistant		DATE	1/5/95		
TYPE OR PRINT NAME Darrel	J. Carriger						
(This space for Federal or State office use)	BET	DOI EITH ENVI	MEED	<u> </u>	6/95		
APPROVED BY One Signed by Shannon J.	Shaw ; TITLE FEIL	roleum engi	MEEK	DATE 2/	シ/ グラ		