

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

1991

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection Well	5. Lease Designation and Serial No. LC-029420 B
2. Name of Operator Texaco Exploration & Production Inc. ✓	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 730, Hobbs, NM 88241-0730 (505) 393-7191	7. If Unit or CA, Agreement Designation Skelly Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter F, 1980' FNL & 1980' FWL Sec. 28, T-17-S, R-31-E	8. Well Name and No. Skelly Unit #93
	9. API Well No. 30-015-04885
	10. Field and Pool, or Exploratory Area Grayburg Jackson SR-QN-CB-SA
	11. County or Parish, State Eddy, New Mexico

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	Test Casing for TA
	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

3. 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.)*

- 11-13-91
- Conducted casing integrity test on the above well.
 - Tested 5 1/2" casing from CIBP @ 3160' to surface w/300# for 30 minutes. Held OK.
 - Tested to 300# as per NMOCD guidelines.
 - Request temporarily abandon well status through 11-21-94.
- (COPY OF CHART ON REVERSE SIDE)
ORIGINAL CHART ATTACHED

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

Signed M. C. [Signature] Title Engr. Asst. Date 11-21-91

(This space for Federal or State office use)

Approved by [Signature] Title 12 MONTH PERIOD Date 11/29/91

Conditions of approval, if any:

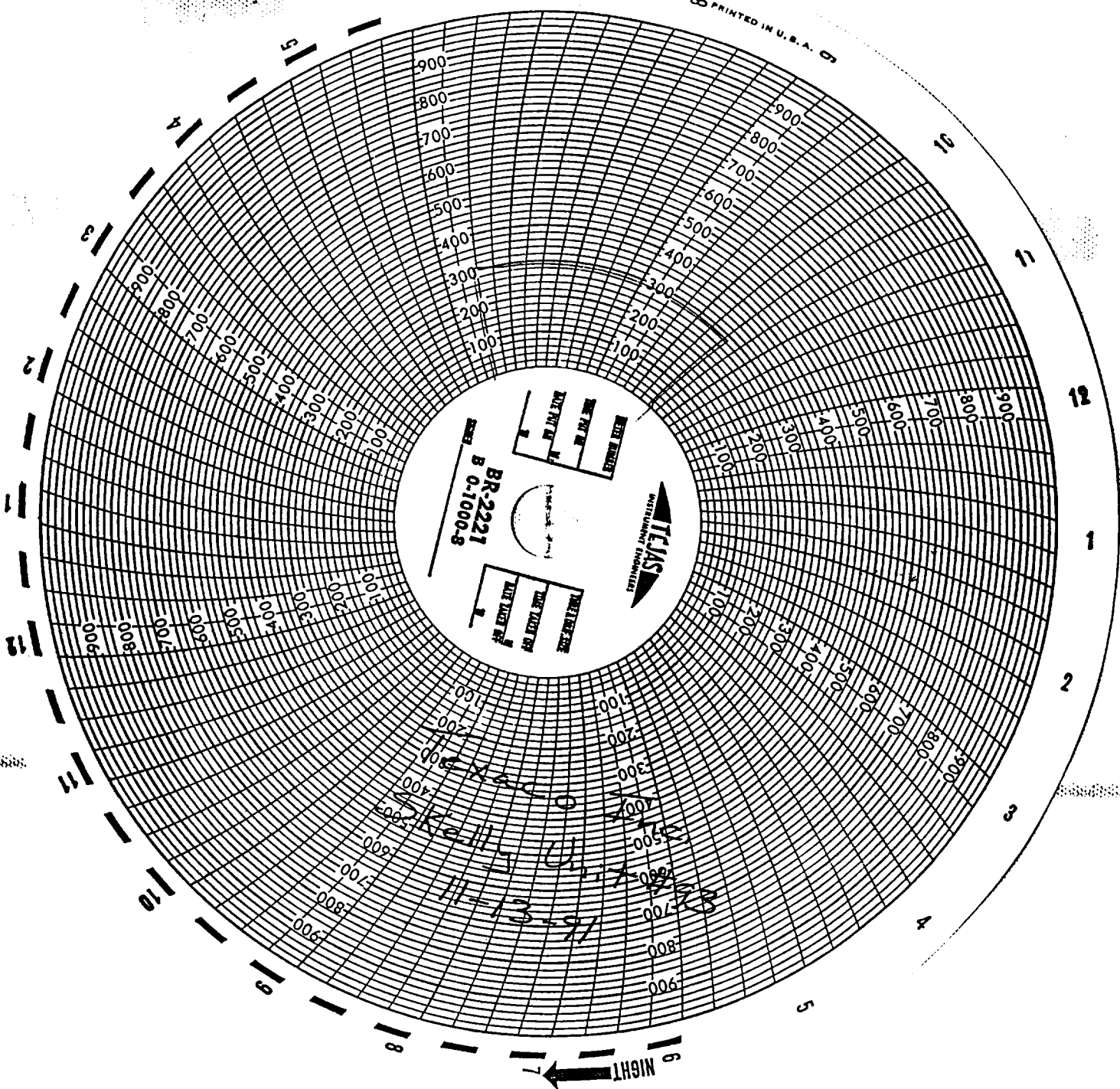
11/30/92

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

*See Instruction on Reverse Side

6 DAY →

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TEAS ENGINEERING