SUNDRY NOTICES AND REPOR  (Do not use this form for proposals to drill or to deepen or plus Use "APPLICATION FOR PERMIT-" for such proposals to drill or to deepen or plus Use "APPLICATION FOR PERMIT-" for such proposals to drill or to deepen or plus Use "APPLICATION FOR PERMIT-" for such proposals to drill or to deepen or plus Use "APPLICATION FOR PERMIT-" for such proposals to drill or such proposals to drill or to deepen or plus Use "APPLICATION FOR PERMIT-" for such proposals to drill or such propos	g back to a diposals.)  3a (S) any State requirements	JUN 22 'S  a. AREA CODE & PHOLOMA  915) 688-4620  uirements.*	7. U 8. F. KINO 2 10. F SHU 11. S SEC 12. C EDD)	Other Data RT OF: REPAIRING WE	WILDCAT SPRING, N LK. AND , R-31-E 13. STATE	
OIL WELL OTHER  2. NAME OF OPERATOR TEXACO INC.  3. ADDRESS OF OPERATOR P. O. Box 3109, Midland, TX 79702  4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface  827' FSL & 874' FEL, UNIT LETTER P.  14. PERMIT NO. API-30-015-26360  16. Check Appropriate Box To Inc.  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASING MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* CHANGE PLANS  (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all per posed work. If well is directionally drilled, give subsurface located and posed work. If well is directionally drilled, give subsurface located and proposed work. If well is directionally drilled, give subsurface located and per posed work. If well is directionally drilled, give subsurface located and per posed work. If well is directionally drilled, give subsurface located and per posed work. If well is directionally drilled, give subsurface located and per posed work. If well is directionally drilled, give subsurface located and per posed work. If well is directionally drilled, give subsurface located and per posed work. If well is directionally drilled, give subsurface located and per posed work.	(S any State requirements of the state of th	a. AREA CODE & PHONE NO.  915) 688-4620  uirements.*  GR, etc.)  ture of Notice, Results  Subs  WATER SHUT-OFF  FRACTURE TREATMENT	8. F. KINC 9. W 2 10. F SHU 11. S SEC 12. C EDDY	ARM OR LEASE NAM. CAID—WATSON ELL NO. IELD AND POOL, OR Y IGART BONE S EC., T., R., M., OR BI SURVEY OR AREA  2. 7, T-18-S, OUNTY OR PARISH ( Other Data RT OF: REPAIRING WE	WILDCAT SPRING, N LK. AND , R-31-E 13. STATE NM	
TEXACO INC.  3. ADDRESS OF OPERATOR P. O. Box 3109, Midland, TX 79702  4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface  827' FSL & 874' FEL, UNIT LETTER P.  14. PERMIT NO. API-30-015-26360  15. ELEVATIONS (Show with GR-3650', KB-3660')  16. Check Appropriate Box To Inc.  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all per posed work. If well is directionally drilled, give subsurface locations and control of the subsurface location of the control	(S any State requirements of the state of th	915) 688-4620  uirements.*  GR, etc.)  ture of Notice, Republication Substitute Shut-Off FRACTURE TREATMENT	9. W 2 10. F SHU 11. S SEC 12. C EDD)	CAID-WATSON ELL NO.  IELD AND POOL, OR VIGART BONE S EC., T., R., M., OR BI SURVEY OR AREA  E. 7, T-18-S, OUNTY OR PARISH ( Other Data  RT OF: REPAIRING WE	WILDCAT SPRING, N LK. AND , R-31-E 13. STATE NM	
P. O. Box 3109, Midland, TX 79702  4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.) At surface  827' FSL & 874' FEL, UNIT LETTER P.  14. PERMIT NO. API-30-015-26360  16. Check Appropriate Box To Inc.  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all per posed work. If well is directionally drilled, give subsurface located.)	(S any State requirements of the state of th	915) 688-4620  uirements.*  GR, etc.)  ture of Notice, Republication Substitute Shut-Off FRACTURE TREATMENT	9. W 2 10. F SHU 11. S SEO 12. C EDD	ELL NO.  IELD AND POOL, OR Y IGART BONE S  EC., T., R., M., OR BI SURVEY OR AREA  E. 7, T-18-S, OUNTY OR PARISH  Other Data  RT OF:  REPAIRING WE	WILDCAT SPRING, N LK. AND , R-31-E 13. STATE NM	
4. LOCATION OF WELL (Report location clearly and in accordance with See also space 17 below.)  At surface  827' FSL & 874' FEL, UNIT LETTER P.  14. PERMIT NO.  API-30-015-26360  16. Check Appropriate Box To Inc.  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all per posed work. If well is directionally drilled, give subsurface located in the control of the	any State requirements any State requirements and state requirements	915) 688-4620 uirements.*  GR, etc.)  Sture of Notice, Republication Substitution S	2 10. F SHU 11. S SEO 12. C EDD	IELD AND POOL, OR SIGART BONE S EC., T., R., M., OR BI SURVEY OR AREA  E. 7, T-18-S, OUNTY OR PARISH  Other Data  RT OF:  REPAIRING WE	SPRING, N LK. AND , R-31-E 13. STATE NM	
See also space 17 below.) At surface  827' FSL & 874' FEL, UNIT LETTER P.  14. PERMIT NO.  API-30-015-26360  16. Check Appropriate Box To Inc.  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all per posed work. If well is directionally drilled, give subsurface located and appropriate and per posed work. If well is directionally drilled, give subsurface located and per posed work. If well is directionally drilled, give subsurface located and per posed work.	hether DF, RT,	GR, etc.)  Iture of Notice, Reposition of Substantial States Shut-Off Fracture treatment	SHU 11. S SEC 12. C EDDY	GART BONE S  EC., T., R., M., OR BI SURVEY OR AREA  E. 7, T-18-S, OUNTY OR PARISH  C  Other Data  RT OF:  REPAIRING WE	SPRING, N LK. AND , R-31-E 13. STATE NM	
14. PERMIT NO.  API-30-015-26360  16. Check Appropriate Box To Inc.  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all perposed work. If well is directionally drilled, give subsurface located and control of the control of t	8'	Nature of Notice, Results Subs WATER SHUT-OFF FRACTURE TREATMENT	SEC 12. C EDDY port, or (	EC., T., R., M., OR BI SURVEY OR AREA E. 7, T-18-S, OUNTY OR PARISH ( Other Data RT OF: REPAIRING WE	, R-31-E 13. STATE NM	
API-30-015-26360  GR-3650*, KB-3660  16.  Check Appropriate Box To Incomplete Box To	8'	Nature of Notice, Results Subs WATER SHUT-OFF FRACTURE TREATMENT	12. C EDD	OUNTY OR PARISH   Other Data  RT OF:  REPAIRING WE	13. STATE	
API-30-015-26360  GR-3650*, KB-3660  16.  Check Appropriate Box To Incomplete Box To	8'	Nature of Notice, Results Subs WATER SHUT-OFF FRACTURE TREATMENT	12. C EDD	OUNTY OR PARISH   Other Data  RT OF:  REPAIRING WE	13. STATE	
16. Check Appropriate Box To Inc.  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* SHOOT OR ACIDIZE ABANDON* CHANGE PLANS (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all per posed work. If well is directionally drilled, give subsurface located in the control of the		SUBS WATER SHUT-OFF FRACTURE TREATMENT	port, or (	Other Data RT OF: REPAIRING WE		
NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF PULL OR ALTER CASING FRACTURE TREAT MULTIPLE COMPLETE SHOOT OR ACIDIZE ABANDON* CHANGE PLANS (Other)  17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all per posed work. If well is directionally drilled, give subsurface located in the control of th	dicate Nat	SUBS WATER SHUT-OFF FRACTURE TREATMENT		RT OF: REPAIRING WE	ill 🔲	
1. BASIN #5 SPUD 14 3/4 HOLE AT 5:00am 6-2-90. 2. RAN 15 JTS OF 11 3/4, 42#, H-40, LT&C CSG. S 3. HALLIBURTON CEMENTED w/ 550 SX CLASS H w/ RETURNS. JIM AMOS WITH BLM WITNESSED JOB. RAI 4. RAN 1 in TUBING TO 544'. CEMENTED w/ 500SX CRAN 1 in. TUBING TO 520'. CEMENTED w/ 50 SX CLASS H THIX SET. NC CEMENTED w/ 50 SX CLASS H w/ 2% Cacl2 @ 15.6p CEMENTED w/ 250 SX CLASS H w/ 2% Cacl2 @ 15.6p	. DRILL TO SET AT 652 2 2 Caci2 ( NN TEMP SU CLASS H W ASS H THIX O RETURNS OPPO NO RE	(other) SPUD & SURF (NOTE: Report result Completion or Rec. and give pertinent dates, esured and true vertical depth of the sured and true vertical depth of th	its of multiple ompletion Reincluding estimates for all in the model of the model o	e completion on vector and Log form imated date of st narkers and zones  45am 6-3-90  RETURNS. WOHR. RAN 1 in.  BING TO 460'.  1 in. TUBING TO 5	Weil X Weil n.)  carting any prose pertinent to a p	 this
CEMENTED w/ 80 SX CLASS H w/ 2% Cacl2 @ 15.6p AMOS WITH BLM APPROVED JOB.  5. INSTALL WELLHEAD. J&W TESTED TO 550#.  6. NU BOP AND TEST TO 3000#.  7. WOC TIME 37 1/2 HOURS FROM 8:00pm 6-4-90 8. TESTED CASING TO 1500# FOR 30 MIN. FROM 12:09. DRILLING 11 in. HOLE.	TO 9:30am 00 TO 12:3	n 6-6-90. 30pm 6-6-90. :50 404 834 030		OARLA IN THE TER	Jun 11	RECEIVED

\*See Instructions on Reverse Side

CARLSBAD, NEW AN MICO

DRILLING SUPERINTENDENT

06-07-90

DATE

DATE

TITLE

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

(This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

SIGNED

## 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 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.

## PRIVACY ACT

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 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 approval 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 record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

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.