

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN THIS MANNER
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM-0514349-A

6. IF INDIAN, ALLOTTEE OR TRIBE 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 ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR
Texaco Producing Inc. RECEIVED

3. ADDRESS OF OPERATOR
P.O. Box 730, 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

ULJ, 2932 FNL, 1980 FEL, Sec 4, T21S, R26E C. C. D.
ARTESIA OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Western Reserves Federal

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
Avalon Upper Penn (Gas)

11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA
S 4, T21S, R26E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3190 GR

12. COUNTY OR PARISH
Eddy

13. STATE
NM

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) Flow Test

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.)

Texaco opened well 4-21-88 and flowed until 5-11-88. Recovered
55 BO, 39 BW, 211 MCFPD at FTP 138 PSI. SI 5-11-88. Present status: SI.

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

397-3571

SIGNED

J. A. Head

TITLE

Hobbs Area Superintendent

DATE 12-27-88

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE

JAN 1 9 1989

CONDITIONS OF APPROVAL, IF ANY:

SJS

CARLSBAD, NEW MEXICO

*See Instructions on Reverse Side