

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88201

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

Oil CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-015-31853

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

7. Lease Name or Unit Agreement Name

NEW MEXICO "DF" STATE COM

8. Well No.

4

9. Pool Name or Wildcat

LOAFER DRAW MORROW SE

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT
(FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
15 SMITH ROAD, MIDLAND, TX 79705

4. Well Location
Unit Letter J : 2310' Feet From The SOUTH Line and 1650' Feet From The EAST Line
Section 32 Township 21-S Range 23-E NMPM EDDY COUNTY

10. Elevation (Show whether DF, RKB, RT,GR, etc.) 4073'

11. 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 OPERATION ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: FRACTURE STIMULATE ☒

OTHER: ☐

12. 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.

TEXACO E&P INTENDS TO FRACTURE STIMULATE THE SUBJECT WELL TO INCREASE PRODUCTION FROM THE RESERVOIR.

- 1) MIRU PU. INSTL & TEST BOP.
- 2) POH W/2 3/8" TBG.
- 3) TIH W/MIXED STRING OF 1000' 2 7/8" TBG & PKR TO 8384' ON 3 1/2" TBG.
- 4) FRAC ACCORDING TO SCHLUMBERGER PROCEDURE.
- 5) FLOW/SWAB BACK TILL WELL FLOWS.

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

SIGNATURE J. Denise Leake TITLE Regulatory Specialist

DATE 6/13/2002

Telephone No. 915-687-7375

TYPE OR PRINT NAME J. Denise Leake

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

**ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR**

TITLE

DATE

DeSoto/Nichols 12-93 ver 1.0