

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

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.

30-015-20899

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

E5229-4

SUNDRY NOTICES AND REPORTS ON WELL
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
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
205 E. Bender, HOBBS, NM 88240

4. Well Location
Unit Letter J : 1980 Feet From The SOUTH Line and 1980 Feet From The EAST Line
Section 16 Township 23S Range 30E NMPM EDDY COUNTY

7. Lease Name or Unit Agreement Name

FORTY NINER RIDGE UNIT

8. Well No.

1

9. Pool Name or Wildcat

FORTY NINER RIDGE DELAWARE

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3213' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☒ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: CASING INTEGRITY TEST FOR TA STATUS ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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.

The following procedure is to test the integrity of the casing and then to request Temporary Abandonment of the subject well.

Note: Top perf at 4,433'. Give notice to NMOCD 24 hours prior to starting work.

1. MIRU pulling unit.

2. TOH with production equipment. TIH with 9-5/8" casing scraper on 2-7/8" workstring to +/- 4,400'. TOH and LD scraper.

3. TIH with 9-5/8" CIBP on 2-7/8" workstring and set within 100' of top perf. Circulate hole with inhibited fluid and test as per NMOCD guidelines to #500 for 30 minutes.

4. TOH with 2-7/8" tubing. ND BOP and NU wellhead. RDMO. Request temporally abandoned well status.

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

SIGNATURE Greg Maes TITLE Engineering Assistant

DATE 6/27/97

TYPE OR PRINT NAME V. Greg Maes

Telephone No. 397-0431

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature]

DATE JUL 2 1997

CONDITIONS OF APPROVAL, IF ANY: