

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. 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

SEP 29 1993

WELL API NO.

30-015-23757

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Texaco Exploration and Production Inc.

3. Address of Operator

P.O. Box 730 Hobbs, New Mexico 88240

4. Well Location

Unit Letter F : 1980 Feet From The North Line and 1880 Feet From The West Line

Section 6

Township 24-S

Range 29-E

NMPM

Eddy

County

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

2954' 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: ADD PAY AND ACIDIZE ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

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.

TEPI requests cancellation of the plug and abandonment procedure dated 4-3-92.

1. MIRU. PERF THRU 2 3/8" TBG W/ 1 11/16" GUN @ 2 JSPF FR
11,991'-12,150' (TOTAL OF 32 FT - 66 HLES)

2. A/ PERFS W/ 3000 GALS 15% NEFE, MAX P = 1000#.

3. SWAB & RETURN TO PRODUCTION.

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

SIGNATURE

Monte C. Duncan

TITLE

Engineer's Assistant

DATE

9-27-93

TYPE OR PRINT NAME

Monte C. Duncan

TELEPHONE NO. 393-7191

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

OCT 19 1993

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: