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Form 3160-5 UNI: J STATES ** ***		CONTACT RECEIVING CONTACT RECEIVING COPIES REQUIREL	BLM Roswell District Modified Form No. NM060-3160-4	
/Formarky 9 221) DEPARTIN	(Other instructions on reverse side)	5. LEASE DESIGNATION AND SERIAL NO.		
BUREAU OF LAND MANAGEMENT			NM-25876	
SUNDRY NOTION (Do not use this form for proposals Use "APPLICATION")	6. IF INDIAN, ALLOTTEE C	R TRIBE NAME		
1. OIL GAS WELL OTHER	7. UNIT AGREEMENT NAME			
2. NAME OF OPERATOR			8. FARM OR LEASE NAME	
TEXACO EXPLORATION AND PRODUCTION INC.			GETTY '24' FEDERAL	
3. ADDRESS OF OPERATOR		3a. AREA CODE & PHONE NO.	9. WELL NO.	
P. O. Box 3109, Midland	I, TX 79702	(915) 688–4620	6	
 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) 			10. FIELD AND POOL, OR WILDCAT LIVINGSTON RIDGE DELA.	
At surface 1650' FNL & 990' FWL, UNIT LETTER E.			11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
	SEC. 24, T-22-S, R-31-E			
14. PERMIT NO. 15. ELEVATIONS (Show whether DI		RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
API NO 30-015-27084 GR-3545'			EDDY	NM
16. Check Ap	propriate Box To Indicate	Nature of Notice, Report	, or Other Data	
NOTICE OF INTENTION TO: SUBSEQUE			NT REPORT OF:	
TEST WATER SHUT-OFF PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING WELL	
	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING	
<u> </u>	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR WELL	REPAIR WELL CHANGE PLANS (Other)			
			f multiple completion on Vetion Report and Log form	
17. DESCRIBE PROPOSED OR COMPLETED OP posed work. If well is directionally work.)* DUE TO DRILLING PRIORITY, WE	drilled, give subsurface locations and	tails, and give pertinent dates, inclument dates, inclument and true vertical depths	ding estimated date of st for all markers and zones	arting any pro- pertinent to this
PLEASE EXTEND THIS PERMIT F		DE. OHE THE ROUGHT 12,	1992 PVGHVHAN	MIE.

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

SIGNED C. P. Busham / C. H. TITLE DRILLING OPERATIONS MANAGER

(This space for Federal or State office use)

APPROVED BY TITLE DATE

DATE

1.2 5/12/94