

Form 3160-5
(July 1989)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVED
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on reverse
side)

NM OIL CONS COMMISSION
Drawer DD

Artesian NM 88210
Modified Form No.
NM060-3160-4

5. LEASE DESIGNATION AND SERIAL NO.
NM-25876

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 ☐

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
TEXACO EXPLORATION AND PRODUCTION INC.

8. FARM OR LEASE NAME
GETTY '24' FEDERAL

3. ADDRESS OF OPERATOR
P. O. Box 3109, Midland, TX 79702

3a. AREA CODE & PHONE NO.
(915) 688-4620

9. WELL NO.
6

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

10. FIELD AND POOL, OR WILDCAT
LIVINGSTON RIDGE DELA.

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.
API NO. - 30-015-27084

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
GR-3545'

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

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☐

PULL OR ALTER CASING

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☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) EXTEND DRILLING PERMIT

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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(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.)*

DUE TO DRILLING PRIORITY, WE WILL NOT SPUD THIS WELL BEFORE THE AUGUST 12, 1994 EXPIRATION DATE.
PLEASE EXTEND THIS PERMIT FOR AN ADDITIONAL YEAR.

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

SIGNED C.P. Bashum / cwt

TITLE DRILLING OPERATIONS MANAGER

DATE 07-07-94

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side