

O CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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OCT 29 1986

3a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
G-8794

SUNDRY NOTICES AND REPORTS OF WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR P.L. BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION OR PERMITS" WORKSHEET FOR PROPOSALS.)

1. Name of Operator
Texaco Producing Inc.
2. Address of Operator
P.O. Box 728, Hobbs, New Mexico 88240
3. Location of Well
UNIT LETTER E 330 FEET FROM THE South LINE AND 380 FEET FROM
THE West LINE, SECTION 36 TOWNSHIP 26S RANGE 29E N.M.P.M.
4. Indicate Type of Well
OIL WELL ☒ GAS WELL ☐ OTHER ☐
6. Farm or Lease Name
Salt Mountain State '38'
9. Well No.
2
10. Field and Pool, or Vicinity
Brushy Draw Delaware
15. Elevation (Show whether DF, RT, GR, etc.)
2877' GR
12. County
Eddy

16. 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 ☐
SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPS. ☒ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐ OTHER ☐

17. 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.

Total Depth 5350'
11 3/4", 42#, H-40, ST&C csg set @ 502'

1. Ran 77 jts (2979') 8 5/8", 32#, J-55, ST&C csg set @ 2989'.
2. Cmdt w/ 900 sxs cl. 'H' LW w/ 15# /sx salt & 1/4# /sx floseal. Tailed w/ 250 sxs cl. 'H' w/ 1/4# /sx floseal. Circ. 200 sxs to surface.
3. Tested csg to 1500# from 8:00 AM to 8:30 AM 10-16-86. Tested OK. Job complete @ 8:30 AM.
4. Ran 130 jts (5339') 5 1/2", 15.5#, J-55, LT&C csg set @ 5350'.
5. Cmdt first stage w/ 260 sxs cl 'H' LW w/ 1/4# /sx floseal. Tail w/ 250 sxs cl 'H' w/ 1/4# /sx floseal. Circ. 100 sxs to surface. Cmdt second stage w/ 500 sxs cl 'H' LW w/ 1/4#, /sx floseal. Circ. 82 sxs to surface.
6. Tested csg to 2500# from 5:00 PM to 5:30 PM 10-24-86. Tested ok. Job complete at 5:30 PM.

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

SIGNED Les A. Clements TITLE Dist. Adm. Sup. DATE Oct. 27, 1986

Original Signed By
Les A. Clements

APPROVED BY Supervisor District II TITLE DATE NOV 10 1986

CONDITIONS OF APPROVAL, IF ANY: