

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

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

NM OIL CONS COMMISSION  
NM Roswell District  
Modified Form No.  
NM400-3160-5  
Ar 88210

215F

**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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                 |                                                            | 7. UNIT AGREEMENT NAME                                                                                                                  |                  |
| 2. NAME OF OPERATOR<br>TEXACO EXPLORATION AND PRODUCTION INC.                                                                                                                    |                                                            | 8. FARM OR LEASE NAME<br>'EE' -24- FEDERAL                                                                                              |                  |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 3109, Midland, TX 79702                                                                                                                      |                                                            | 3a. AREA CODE & PHONE NO.<br>(915) 688-4606                                                                                             | 9. WELL NO.<br>3 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1880' FNL & 1650' FEL, UNIT LETTER G. |                                                            | 10. FIELD AND POOL, OR WILDCAT<br>DAGGER DRAW UP.PENN.N.<br>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>SEC. 24, T-19-S, R-24-E |                  |
| 14. PERMIT NO.<br>API NO.- 30-015-27226                                                                                                                                          | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>GR-3598' | 12. COUNTY OR PARISH<br>EDDY                                                                                                            | 13. STATE<br>NM  |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

|                                                                    |                                               |
|--------------------------------------------------------------------|-----------------------------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/>                       | PULL OR ALTER CASING <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/>                            | MULTIPLE COMPLETE <input type="checkbox"/>    |
| SHOOT OR ACIDIZE <input type="checkbox"/>                          | ABANDON* <input type="checkbox"/>             |
| REPAIR WELL <input type="checkbox"/>                               | CHANGE PLANS <input type="checkbox"/>         |
| (Other) EXTEND DRILLING PERMIT <input checked="" type="checkbox"/> |                                               |

SUBSEQUENT REPORT OF:

|                                                |                                          |
|------------------------------------------------|------------------------------------------|
| WATER SHUT-OFF <input type="checkbox"/>        | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREATMENT <input type="checkbox"/>    | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/>    |
| (Other) <input type="checkbox"/>               |                                          |

(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 DECEMBER 3, 1994 EXPIRATION DATE.  
PLEASE EXTEND THIS PERMIT FOR AN ADDITIONAL YEAR.

APPROVED FOR 12 MONTH PERIOD  
ENDING 12/3/95

RECEIVED  
NOV 2 11 21 AM '94  
CAND  
AREA

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

SIGNED C. Wade Howard TITLE ENGINEER'S ASSISTANT DATE 11-01-94

(This space for Federal or State office use)

APPROVED BY (ORIG. SGD.) JOE G. LARA TITLE PETROLEUM ENGINEER DATE 12/20/94  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side