

Submit 3 copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

ALL KNOWN REPORTS

Form C-103 Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box 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

WELL API NO.	30-025-29734
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	880620
7. Lease Name or Unit Agreement Name	WEIR, M. B. -B-
8. Well No.	12
9. Pool Name or Wildcat	WEIR EAST BLINEBRY/SKAGGS DRINKARD

SUNDRY NOTICES AND REPORTS ON WELL (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 & PRODUCTION INC.

3. Address of Operator 205 E. Bender, HOBBS, NM 88240

4. Well Location Unit Letter M : 990 Feet From The SOUTH Line and 330 Feet From The WEST Line Section 12 Township 20S Range 37E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3573 KB

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPERATION <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input checked="" type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>DRILL PLUG ABOVE DRINKARD &amp; DHC <input checked="" type="checkbox"/></p>
--	---	--	---

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.

TEST OF BLINEBRY ZONE PRIOR TO WORKOVER: 7 BO, 137 BW, 158 MCF.

- 5-27-97: MIRU. RAN BIT & DC'S ON 2 3/8" TBG TO 2200'
- 5-28-97: RAN BIT & TAG FILL @ 6404'. C/O FR 6404-6550'. DDRILL CIBP FR 6550-6551'. PSH JUNK TO 7075' (NEW PBTD).
- 5-29-97: RAN PKR, SN & TEST IN 2 3/8" TBG @ 5000#. PSA 5647'. ACIDIZED WEIR BLINEBRY EAST 5714-5810', & SKAGGS DRINKARD 6607-6903' W/5000 GALS 15% NEFE IN 3 STGS USING 3500# RK SLT. FLSH W/22 BBLs 2% KCL FW.
- 5-30-97: REL PKR. RAN MUD ANCHOR, SN, TBG. REM BOP. MA @ 6967'. SN @ 6939'. RAN PUP & RDS. LINER @ 6952'. SPACE PUMP @ 7". LOAD & TEST TBG. RIG DOWN. ON PRODUCTION @ 5:30 PM.
- 6-24-97: ON 24 HR OPT. PUMPED 10 BO, 140 BW, & 190 MCF. PROD FR COMMINGLED CSG PERFS

WEIR BLINEBRY EAST PERFS 5714-5810': 67% OIL, 98% WATER, 83% MCF 7 BO, 137 BW, 158 MCF

SKAGGS DRINKARD PERFS 6607-6903': 33% OIL, 2% WATER 17% MCF 3 BO, 3 BW, 32 MCF.

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

SIGNATURE *J. Denise Leake* TITLE Engineering Assistant DATE 4/30/98

TYPE OR PRINT NAME J. Denise Leake Telephone No. 397-0405

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUN 08 1998

CONDITIONS OF APPROVAL, IF ANY: