

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. 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. 30-025-00060
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-9639
7. Lease Name or Unit Agreement Name MOORE DEVONIAN COOP SWD SYSTEM
8. Well No. 2
9. Pool name or Wildcat MOORE DEVONIAN
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4340' DF

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER DISPOSAL WELL
2. Name of Operator Texaco Exploration and Production Inc.
3. Address of Operator P. O. Box 730 Hobbs, NM 88240
4. Well Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>24</u> Township <u>11-S</u> Range <u>32-E</u> NMPM LEA
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4340' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

THE ABOVE DISPOSAL WELL FAILED A PREVIOUS CASING INTEGRITY TEST ON 11/3/92.

1/16/93

1. REPLACED 70 JOINTS OF 3 1/2" TUBING & REPAIRED 5 1/2" PACKER. TIH W/ TUBING & SET PACKER @ 10425'.
2. NOTIFIED NMOC D OF SECOND CASING INTEGRITY TEST.
3. TESTED 5 1/2" CASING FROM SURFACE TO PACKER @ 10425' AS PER NMOC D GUIDELINES TO 300# FOR 30 MINUTES. HELD OK.
4. RETURNED WELL TO DISPOSAL OPERATIONS.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

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

SIGNATURE Monte C. Duncan TITLE ENGINEER'S ASSISTANT DATE 1-26-93
TYPE OR PRINT NAME MONTE C. DUNCAN TELEPHONE NO. 393-7191

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE JAN 28 1993

CONDITIONS OF APPROVAL, IF ANY:

PRINTED IN U.S.A.

DAY

NIGHT

TEJAS
INDUSTRIAL ENGINEERS
MODE DEUSIAN COOP
SWD SYSTEM-2

WATER NUMBER
TIME PUT IN
DATE PUT IN

WATER NUMBER
TIME TAKEN IN
DATE TAKEN IN

BR-2221
B 0-1000-8

1-16-93

TEXAS EXPLORATION AND PRODUCTION INC
PO BOX 730
HOBBES NEW MEXICO 88241-0730
7-11-93