

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL GUNS. COMMISSION
P. O. BOX 1980
HOBBS, NEW MEXICO 88240
SUBMIT IN TRI
HOBBS, NEW MEXICO
VERSE SIDE

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-0338-A
2. NAME OF OPERATOR Texaco Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FSL & 1980' FEL of Section		8. FARM OR LEASE NAME Peery Federal
14. PERMIT NO.		9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3955' GR		10. FIELD AND POOL, OR WILDCAT LittleLuckyLake-Morrow
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 29 T-15-S, R-30-E
		12. COUNTY OR PARISH Chaves
		13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

Shut-In

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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.)*

REMARKS

1. Well Status - Shut-In Natural Gas Condensate
2. Temporary Abandonment Date - August 1, 1986
3. Reason for Abandonment - Stuck Packer
4. Future Plans - Remedial Work
5. Date of Future Workover or Plugging - 3rd Quarter 1987

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

SIGNED

W.B. Loh

TITLE

Dist. Oper. Manager

DATE

8-20-86

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR 12 MONTH PERIOD

ENDING

8/22/87
See Instructions on Reverse Side

APPROVED
DATE
PETER W. CHESTER

AUG 22 1986

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA