

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.	3002501142
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	543630
7. Lease Name or Unit Agreement Name	NEW MEXICO -AN- STATE
8. Well No.	7
9. Pool Name or Wildcat	SAUNDERS PERMO UPPER PENN
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	4213' DF

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 INJECTION WELL

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

4. Well Location
Unit Letter A : 660 Feet From The NORTH Line and 660 Feet From The EAST Line
Section 22 Township 14S Range 33E NMPM LEA COUNTY

11. 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 OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: CASING INTEGRITY TEST FOR TA STATUS ☒

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.

8/30/94 - 8/31/94

- MIRU RAM. RELEASE PACKER AND TOH
 - SET CIBP @ 9707' CAPPED W/ 35' CMT, PBTD @ 9672
 - CIRCD HOLE W/ INHIBITED FLUID @ TSTD AS PER NMOC D GUIDELINES TO 500# FOR 30 MIN, HELD OK.
 - TOH W/ TBG. REQUEST TEMPORARILY ABANDON WELL STATUS THROUGH 8/31/99
- (ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

This Approval of Temporary
Abandonment Expires

9-8-99

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

SIGNATURE Richard DeSoto TITLE Engineering Assistant DATE 9/7/94

TYPE OR PRINT NAME Richard B. DeSoto Telephone No. 397-0416

(This space for State Use)

APPROVED BY Richard B. DeSoto TITLE Engineering Assistant DATE 9/7/94

CONDITIONS OF APPROVAL, IF ANY:

