STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

MO. 07 COPICS SCCEIVED		
DISTRIBUTION		
SANTA FE		
FILE	7-	
U.S.G.S.	1	
LAND OFFICE	1	
OPERATOR	1	

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE	SANTA FE, NEW MEXICO 87501	Revised 10-1-7
U.S.O.S.		5a. Indicate Type of Lease
LAND OFFICE OPERATOR		State XX Fee
OPERATOR		5. State Oil & Gas Lease No.
SUNDR'	Y NOTICES AND REPORTS ON WELLS	minimini
1.	POSALS TO DRILL OR TO DEEPEN OR PLUG BOCK TO A DIFFERENT RESERVE SON FOR PERMIT _** (FORM C-101) FOR SUCH PROPOSALS.)	DIA. (
OIL X GAS WELL	OTHER.	7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Texaco Inc. 3. Address of Operator		Texaco Lazy J St. TN
PO Box 728, Hobbs, NM 88240		9. Well No.
4. Location of Well	00240	1
UNIT LETTER 0 660 FEET FROM THE SOUTH LINE AND 1980 FEET FROM		10. Field and Pool, or Wildcat
ONLY LESSEE	FEET FROM THE SOUTH LINE AND 1980	FEET FROM Wildcat
THE East LINE, SECTION 26 TOWNSHIP 138 HANGE 33E NMPN		NMPM.
	15. Elevation (Show whether DF, RT, GR, etc.)	
	4207' GL	12. County Lea
Check A	appropriate Box To Indicate Nature of Notice, Repo	
NOTICE OF IN	SUB:	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JO	PLUG AND ABANDOHMENT
	OTHER Drilli	
THER		
17. Describe Proposed or Completed Oper	rations (Clearly state all pertinent details, and give pertinent dates	
work) SEE RULE 1103.		
	Spud 17 1/2" Hole at 5:00 AM, 05/31/	87
	Ran 41 jts. of 13 3/8", 54.5#, K-55, ST	& C, casing set at 1742'.
1. Ran 100 jts. of 9 5,	/8", 40#, K-55, 8RL, casing set at 4200'.	·
2. Cement With 1400 SX.	 HLW With 15# salt and 1/4# Flocal 	2 mm = 13
	11 Will 48 CaCl + 1/4# Flocele 15 6 ppg	Circulated
2/2 SX. Bumped prud	g at /:25 AM, 06/08/87.	
Job complete at 5:45	psig from 5:15 AM to 5:45 AM, ok.	
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	, imi, 00/09/07.	
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	•	
	•	* 1
8. I hereby certify that the information about	ove is true and complete to the best of my knowledge and belief.	
The state of the s	and complete to the best of my knowledge and belief.	397–3571
16HED Da Hear	1	•
	TITLE Hobbs Area Superinte	endent DATE June 22, 1987
ORIGINAL SIGNED BY J	IERRY SEXTON	• -
PROVED BY DISTRICT I SUPE	RVISOR	JUN 2 4 1987

JUN 2.3 1987
OCD
HOBBS OFFICE

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