

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 2068

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-34662

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT
(FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER NEW DRILL

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

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

4. Well Location
Unit Letter N : 660 Feet From The SOUTH Line and 2310 Feet From The WEST Line
Section 14 Township 16-S Range 32-E NMPM LEA COUNTY

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

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: ☐ OTHER: ☒ PRODUCTION CASING

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

10-13-99: RAN 87 JTS OF 5 1/2" 17# M95, LTC, 5 JTS 5 1/2" 17# S95 LTC. 1 JT OF 5 1/2" 17# WC70 LTC, 23 JTS 5 1/2" 17# L80 LTC & 186 JTS 5 1/2" 17# WC75 LTC. SET PIPE @ 12,600'. SET DV TOOL @ 8919'. CENTRALIZED THROUGHOUT THE CHESTER, MORROW, ATOKA & WOLFCAMP ZONES. CMTD 1ST STG W/200 BBL BRINE, 20 BBL CHEM WASH & 1410 SX OF 50/50 POZ, 2% GEL, 5% SALT & 1/4 PPS CELL, MIXED @ 14.2 PPG. OPEN DV TOOL & BEGAN CIRC. CIRC 140 SX TO PIT.

10-14-99: CMT 2ND STG W/940 SX 35/65 POZ H W/6% GEL, 5% SALT & 1/4 PPS OF D29 MIXED @ 12.4 PPG, TAILED IN W/300 SX 50/50 POZ H, 2% GEL, 5% SALT & 1/4 PPS OF D29. CLOSED DV TOOL @ 10:00 AM. SET SLIPS. INSTL TBG HEAD. TEST TO 3100 PSI-OK. NDBOP. REL RIG @ 8:00 PM.

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 10/15/99

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

APPROVED BY J. Denise Leake
DISTRICT SUPERVISOR

APPROVED

CONDITIONS OF APPROVAL, IF ANY: TITLE

DATE 10/17/2000