

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.	30-025-34905
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	TEXMACK 17
8. Well No.	1
9. Pool Name or Wildcat	WILDCAT MORROW
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	4350'

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 PERMI (FORM C-101) FOR SUCH PROPOSALS.	
1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter G : 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line Section 17 Township 16-S Range 32-E NMPM LEA COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	4350'

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: ☐ SPUD & SURF CASING ☒

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.

5-8-00/5-20-00: MIRU ROTARY TOOLS. DRILLING 0-526'. SPUD @ 2300 HRS 5-08-00. DRILLING @ 576'. RAN 13 JTS 11.75" 42# WC40 CSG. CMT W/100 SX CL C & TAIL IN W/250 SX CL C CMT. WOC 5.5 HRS. NUBOP. DRILL 576-1250,2395, 2875,3195,3388,3432,3742,4005,4285,4425,4500. TD 11" HLE @ 1:00 PM 5-19-00. RAN PE 4484-572 & GR-DLL 4487-572. WIRELINE TD @ 4502'. TIH W/DC'S.

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 5/21/00

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE