

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. 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. 3002502250
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1189
7. Lease Name or Unit Agreement Name Vacuum Grayburg San Andres Unit
8. Well No. 55
9. Pool name or Wildcat Vacuum Grayburg San Andres

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Texaco Producing, Inc.	
3. Address of Operator P.O. Box 730, Hobbs, New Mexico 88240	
4. Well Location Unit Letter <u>D</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>1</u> Township <u>18-S</u> Range <u>34-E</u> NMPM <u>Lea</u> County <u></u>	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3998 GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

- 7-25-89
1. RUPU, Install BOP, POH w/ rods & tubg.
  2. TIH w/4 3/4" bit & clean out open hole 4082' to 4710' T.D., TOH w/bit.
  3. TIH w/5 1/2" pkr & set @ 3498' (tailpipe @ 4214')
  4. Treat w/8000 gals gelled 51% HCL NEFE & 1500# rock salt in 4 stages.  
Max P=2700psi, min P= 600psi, Avg. Rate = 5BPM, ISIP= 700psi,  
10 min=0; scale squeeze w/3 drums, TOH w/Pkr.
  5. TIH w/sub-pump & put on 8-3-89 24 Hr test; 120 BO & 439 BW; Test  
prior 75 BO & 289 BW.

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

SIGNATURE J.A. Head TITLE Area Manager DATE 8-10-89  
TYPE OR PRINT NAME J.A. Head TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

AUG 14 1989

APPROVED BY  TITLE  DATE   
CONDITIONS OF APPROVAL, IF ANY: