

Submit 3 copies  
to Appropriate  
District Office

Energy, Minerals and Natural Resources Department

Revised 1-1-89

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 02277

5. Indicate Type of Lease

STATE ☒

FEE

6. State Oil / Gas Lease No.

857948

7. Lease Name or Unit Agreement Name

VACUUM GRAYBURG SAN ANDRES UT

8. Well No.

7

9. Pool Name or Wildcat

VACUUM GRAYBURG SAN ANDRES

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 ☒ GAS ☐  
WELL WELL OTHER

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 1987 Feet From The West Line  
Section 2 Township 18S Range 34E 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:

## SUBSEQUENT REPORT OF:

|                                                |                                           |                                                      |                                                      |
|------------------------------------------------|-------------------------------------------|------------------------------------------------------|------------------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/>    | ALTERING CASING <input type="checkbox"/>             |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPERATION <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/>        |
| PULL OR ALTER CASING <input type="checkbox"/>  |                                           | CASING TEST AND CEMENT JOB <input type="checkbox"/>  |                                                      |
| OTHER: <input type="checkbox"/>                |                                           | OTHER: <input type="checkbox"/>                      | DEEPEN & ACIDIZE <input checked="" 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.

8/16/00: MIRU. KILL WELL. NUBOP. REL TAC. TIH W/BIT & DC'S. PU WS. STOP BIT @ 2168'.  
8/17/00: TIH & TAG @ 4703'. ESTAB CIRC W/700 BBLS. WASH 4703-4710. DRILL NEW HLE @ 4710-4786'. CIRC CLN. PULL BIT TO 4248'.  
8/18/00: LOWER BIT TO 4786'. BREAK CIRC W/180 BFW 4786-4810'. PULL BIT TO 4265'.  
8/21/00: LOWER BIT ATO 4810'. BREAK CIRC W/80 BFW. TIH W/GR/CNL LOG TOOL. LOG OPEN HLE 4818-4316' & UP TO 4190'. TIH W/PKR. SN. & TBG TO 2170'.  
8/22/00: SET PKR @ 4250'. TEST CSG TO 500 PSI. ACIDIZE VGSAU FORMATION IN OPEN HOLE FR 4311-4818 W/5000 GALS 15% NEFE ACID. RU SWAB FL @ 400'. END FL @ 4000'.  
8/23/00: FL @ 3800'. END FL @ 4000'. DIG OUT WELL HEAD LEAK. TIH W/RBP & PKR. SET RBP @ 4260'. PULL PKR TO 4197'.  
8/24/00: TEST RBP @ 4260 TO 1000 PSI-OK. TIH W/PKR TO 30'. TEST 30' TO 4260' TO 1000 PSI-OK. NDBOP. DROP 2 SX SAND ON RBP. NDWH. DIG OUT WELL. NUWH.  
8/25/00: NDWH. CUT OFF 5 1/2" BAD CSG. WELD SLIP COLLAR. NUWH. NUBOP. TEST WH TO 1000 PSI-OK. FILL UP CELLAR. TIH W/RET TOOL. WASH SAND OFF RBP @ 4260'. FISH RBP.  
8/28/00: TIH W/BIT TO 4810'. NO FILL. TIH W/PROD TBG: GAS ANCHOR, SN, TBG, TAC. BTM OF STRING @ 4786'. SN @ 4780, TAC @ 4192. NDBOP. NUWH. TIH W/PUMP. & RDS.  
8/29/00: LOAD TBG. CHECK PUMP ACTION-OK. BUILD WH. START WELL @ 8:30 AM. RIG DOWN.  
9/04/00: ON 24 HR OPT. PUMPED 18 BO, 143 BW, & 21 MCF.

## FINAL REPORT

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

SIGNATURE

TITLE Engineering Assistant

DATE 9/18/00

TYPE OR PRINT NAME

J. Denise Leake

Telephone No 397-0405

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL IF ANY: TITLE

DATE

DeSoto-Nichols 12-93 ver 1.0