

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.

3002502288

5. Indicate Type of Lease

STATE ☒FEE ☐

6. State Oil / Gas Lease No.

858150

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 ☒ GAS 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 D : 330 Feet From The NORTH Line and 330 Feet From The WEST Line
Section 4 Township 18S Range 34E NMPM LEA COUNTY

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

7. Lease Name or Unit Agreement Name

WEST VACUUM UNIT

8. Well No.

39

9. Pool Name or Wildcat

VACUUM GRAYBURG SAN ANDRES

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: ☐

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.

1. Move in and rig up pulling unit.

2. TOH with production equipment (Rods and Tubing).

2. Set CIBP @ +/- 4450' and dump 35' cmt on top of plug.

3. Check casing integrity. In case of failure, take appropriate action.

4. Circulate hole with inhibited fluid and tested as per NMOCD guidelines to 500# for 30 minutes.

5. Request temporary abandon well status.

THE COMMISSION MUST BE NOTIFIED 24
HOURS PRIOR TO THE BEGINNING OF
PLUGGING OPERATIONS FOR THE C-103
TO BE APPROVED.

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

SIGNATURE

TITLE Prod. Engineer

DATE 9/14/00

TYPE OR PRINT NAME

M. Siamak Safargar

Telephone No. 397-0429

(This space for State Use)

APPROVED

BY CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE

SEP 18 2000

FIELD NO.

DeSoto/Nichols 12-93 ver 1.0

