

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. 30-025-26788	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil / Gas Lease No. B-1306	
7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT	
8. Well No. 144	
9. Pool Name or Wildcat VACUUM GRAYBURG SAN ANDRES	

SUNDRY NOTICES AND REPORTS ON WELL
(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 ☐ GAS WELL ☐ OTHER INJECTION ☐

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

4. Well Location
Unit Letter B : 35 Feet From The NORTH Line and 1330 Feet From The EAST Line
Section 6 Township 18S Range 35E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3988' GL

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.

3/17/94 - 3/26/94

1. MIRU, INSTALLED BOP, ATTEMPTED TO RELEASE PKR, PKR WAS STUCK. TOH W/ INJ TBG.
2. TIH W/ TAP & CAUGHT PKR. PKR FELL TO BOTTOM OF HOLE. C/O TO 4722', LEFT OLD PKR ON BOTTOM @ 4729' (PBSD)
3. SET TREATING PKR @ 4294', ACIDIZED FORMATION W/ 10,300 GALS 20% NEFE. AVG P = 2800#, AIR = 4 BPM. SWABBED BACK LOAD.
4. TIH W/ INJ PKR & EQUIP, CIRCD HOLE W/ PKR FLUID, SET PKR @ 4291', TSTD CSG TO 500# FOR 30 MIN, OK.
5. RETURNED WELL TO INJECTION.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

OPT 3-30-94 INJECTING 310 BWPD @ 940 PSI

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

SIGNATURE Monte C. Duncan TITLE Engr Asst DATE 4/13/94

TYPE OR PRINT NAME Monte C. Duncan Telephone No. 397-0418

(This space for State Use)

APPROVED BY JERRY SEXTON TITLE DISTRICT SUPERVISOR DATE APR 18 1994

CONDITIONS OF APPROVAL, IF ANY: