Form 3 (June 1		FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. 1.C063586		
Do	sundry notices not use this form for proposals to dr Use "APPLICATION FO	6. If Indian, Allottoc or Tribe Name		
	SUBMIT	7. If Unit or CA, Agreement Designation		
X	pe of Well Other Well Well Other me of Operator	8. Well Name and No. S.A. BOWMAN FEDERAL #4		
	exaco Exploration and Production dress and Telephone No.	inc.	<u> </u>	9. API Well No. 30025-30164
Р	Co. Box 730, Hobbs, NM 88240 Cation of Well (Footage, Sec., T., R., M., or Survey D	Description)	505-393-7191	10. Field and Pool, or Exploratory Area LUSK DELAWARE, WEST
U	NIT LETTER N, 990' FSL & 1659' FV EC. 29, T-19-S, R-32-E	11. County or Parish, State LEA COUNTY, NEW MEXICO		
12.	CHECK APPROPRIATE BOX	(s) TO INDICAT		
		[	TYPE OF AC	Change of Plans
	Subsequent Report		Recompletion Plugging Back	New Construction
	Final Abandonment Notice		Casing Repair Altering Casing Other TEMPORARILY ABANDON WELL	Water Shut-Off Conversion to Injection UED Dispose Water (Note: Report results of multiple completion on Well
1( 1. N <sup>(</sup> 2. M 3. S 4. T IS 5. S TI 6. R	escribe Proposed or Completed Operations (Clearly state give subsurface locations and measured and true vert 0/26/93 - 11/01/93 OTIFIED BLM 24 HRS PRIOR TO STAR (IRU. TOH W/ PROD EQUIP. SET CIBP @ 6650' & CAPPED W/ 35' IH W/ TBG. LOADED HOLE W/ INHIB OLATED LEAK TO PERFS @ 6428'-64 SET CIBP @ 6300' & CAPPED W/ 35' ESTED CSG & PLUG TO 500# FOR 30 RECLASSIFIED WELL TO TA STATUS. DRIGINAL CHART ATTACHED, COPY ON	ical depths for all marks T OF WORK. CMT BY DUMP E ITED FLUID & TS 139'. CMT BY DUMP E MINUTES, HELD BACK)	AILER. BAILER. BTD CSG & PLUG TO 500 PSI, BAILER, PBTD @ 6265'. LOAD OK.	LOST PRESSURE, HOLE W/ INHIBITED FLUID,
14. 1	hereby certify that the foregoing is true and correct	ENDAN	12/1/94	
	EVII-1 /	-	INGINEER'S ASSISTANT	Date 11-5-93
	Signed Mortel May	Title		

\*See Instruction on Reverse Side



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11 1AAA	ITED STATES	FORM APPROVED						
	BUREAU OF LAND MANAGEMENT							
SUNDRY NOTICES	LC-063586 6. If Indian, Allottee or Tribe Name							
Do not use this form for proposals to d Use "APPLICATION FC								
SUBMI	7. If Unit or CA, Agreement Designation							
1. Type of Well Sil Gas Well Well Other		8. Well Name and No. S.A. BOWMAN FEDERAL #4 9. API Well No. 30-025-30164 10. Field and Pool, or Exploratory Area LUSK DELAWARE, WEST						
Z. Name of Operator								
Texaco Exploration and Production	Inc.							
3. Address and Telephone No. P.O. Box 730, Hobbs, NM 88240	505 909 7101							
4. Location of Well (Footage, Sec., T., R., M., or Survey [								
UNIT LETTER N, 990' FSL & 1659' FV	11. County or Parish, State							
SEC. 29, T-19-S, R-32-E		LEA COUNTY, NEW MEXICO						
12. CHECK APPROPRIATE BOX	CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR							
TYPE OF SUBMISSION	TYPE OF ACTION	l · · · · · · · · · · · · · · · · · · ·						
Notice of Intent	Abandonment	Change of Plans						
	Recompletion	New Construction						
Subsequent Report	Plugging Back	Non-Routine Fracturing						
Final Abandonment Notice	Casing Repair	Water Shut-Off Conversion to Injection						
	Other TEMPORARILY ABANDON	Conversion to Injection     Dispose Water     (Note: Report results of multiple completion on Well						
13. Describe Proposed or Completed Operations (Clearly state a	Il pertinent details, and give pertinent dates, including, estimated date of startin cal depths for all markers and zones pertinent to this work.)*	Completion or Recompletion Report and Log form.) ag any proposed work. If well is directionally drilled.						
1. NOTIFY BLM 24 HRS PRIOR TO START (	con solution to this work.)*							
2. MIRU. TOH W/ PROD EQUIP.								
3. SET CIBP @ 6650' & CAP W/ 35' CMT	BY DUMP BAILER.							
4. TIH W/ TBG. LOAD HOLE W/ INHIBITE	D FLUID. TEST CSG & PLUG W/ 500 PSI FOR 30	MINUTES.						
5. RECLASSIFY WELL TO TA STATUS. TE REQUESTING TEMPORARILY ABANDONNE	EPI WILL SUBMIT PRESSURE CHART AND SUBSEQUE	ENT REPORT						
le l	15/ ION SHAW OF THE CARLSBAD BLM OFFICE ON 10-	00.00						
	STOLET OF THE GRIEDED BEM OFFICE ON TO-	AREA						
		the case 23						
		$=$ $=$ $\frac{E}{O}$						
		IT AN						
14. I hereby certify that the foregoing is the and correct								
Signed That Come		لاس						
(This space for Federal or State office use)		Date 11-2-93						
Approved by Signad by Shardon a Show	Title	11/29/92						
Conditions of approval, if any:		Date 7 7 7 7 5						
	· · · · · · · · · · · · · · · · · · ·							
Title 18 U.S.C. Section 1001, makes it a crime for any person or representations as to any matter within its jurisdiction.	knowingly and willfully to make to any department or agency of the United	States any false, fictitious or fraudulent statements						

\*See Instruction on Reverse Side

Form 3160-5 (June 1990)	DEPARTMEN	TED STATES IT OF THE INTERIC LAND MANAGEME	Noy 3 11 J7 MM	ļ	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. LC-063586
Do not use this		6. If Indian, Allottee or Tribe Name			
1 Trees of Mall		7. If Unit or CA, Agreement Designation			
1. Type of Well Oil Well 2. Name of Operator		8. Well Name and No. S.A. BOWMAN FEDERAL #4			
Texaco Explo	pration and Production	nc.		F	9. API Well No.
3. Address and Telephon					30-025-30164
	, Hobbs, NM 88240		505-393-71	91	10. Field and Pool, or Exploratory Area
	btage, Sec., T., R., M., or Survey D			-	LUSK DELAWARE, WEST
UNIT LETTER N SEC. 29, T-19	N, 990' FSL & 1659' FV	/L			11. County or Parish, State
- 	- 				LEA COUNTY, NEW MEXICO
· · · · · · · · · · · · · · · · · · ·	APPROPRIATE BOX	s) TO INDICATE N	ATURE OF NOTICE	, REPOR	T, OR OTHER DATA
	FSUBMISSION		TYPE OF	ACTION	
	e of Intent		ndonment		Change of Plans
X Subse	quent Report		ompletion		New Construction
200sc	гристи кероп		iging Back ing Repair		Water Shut-Off
🔲 Final	Abandonment Notice		ring Casing		Conversion to Injection
		K Oth	ADD PAY, ACIDIZE, &	<u> </u>	Dispose Water
			FRAC		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
9/14/93 - 10, 9/14/93 - 10, 1. MIRU. TOH W/ 2. RUN GR-CCL L 3. SET PKR @ 650 SI 1 HR, SWAB 4. MINI FRACD PE 5. ATTEMPTED TO @ 6600' & CAP W/ 150 SXS C 6. D/O CMT RET 7. SPTD 35 SXS C TO 6776'. PRE 8. SET PKR @ 653 9. FRACD W/ 34, 10. TOH W/ PKR,	Controls and measured and true verts /1/93 PROD EQUIP. TAG FILL OG. PERFD DELAWARE 00'. ACIDIZED PERFS W/ BED BACK LOAD. RFS W/ 8400 GALS 309 0 FRAC NEW PERFS, HA PED W/ 25' CMT. TST LASS H CMT @ 3 1/2 BF & CMT FR 6424'-40', F CMT FR 6472'-6157', T ESSURED UP TO 1200#,	Cal depths for all markers and @ 6568', C/O TO 6 FR 6732'-6725' & / 1500 GALS HCL NI # SPECTRA FRAC G & D COMMUNICATION FO D CIBP & BS, OK. S M @ 1100#. WOC. ELL OUT. PRESSUR STD CSG TO 1725#, HELD OK. 00 GALS 30# X/L G A GRAC GEL & 130,0 PROD EQUIP, & RETU	zones pertinent to this work.)* 800'. SPTD 5 BBL A FR 6714'-6690'@ 2 EFE, FLUSHED W/ 30 30 BPM. MAX P = 4 R UPPER PERFS @ 64 ET CMT RET @ 6382' ED UP TO 1000#, LO3 HELD OK. TAGD CM EL INTO PERFS @ 669 000# OTTAWA SAND. JRNED WELL TO PROD	CETIC ACII SPF (66 H BFW. M 5860#. 28'-39". & SQZD P ST 425# I T @ 6252' 00'-6732' MAX P = DUCTION. APPBOVA	HLES) HAX P = 4600#, AIR = 5.5 BPM. TOH W/ PKR, SET CIBP PERFS @ 6428'-39' N 25 MIN. TOH W/ WS. , D/0 CMT & CIBP @ 6600', , FLUSHED W/ 63 BFW. 4200#, AIR = 28 BPM.
14. I hereby certify that t	he foregoing is the and correct			b Barara anto research	<b>Star Minescret</b> - Josef Taller
Signed 200	te Coman	Title _ENGINE	ER'S ASSISTANT	ter en la compañía de la compañía d Anticipada de la compañía de la comp Anticipada de la compañía de la comp	
(This space for Feder	al or State office use)				
Approved by Conditions of approve	al, if any:	Title		· · · · · · · · · · · · · · · · · · ·	Date
	-				· ·
Title 18 U.S.C. Section 16 or representations as to an	001, makes it a crime for any person ay matter within its jurisdiction.	knowingly and willfully to ma	ke to any department or agency of	of the United S	tates any false, fictitious or fraudulent statements

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