

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. 30-025-30798	
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 857948	
7. Lease Name or Unit Agreement Name VACUUM GRAYBURG SAN ANDRES UNIT	
8. Well No. 147	
9. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES	
660 Feet From The EAST Line	
NMPM	LEA County

SUNDRY NOTICES AND REPORTS ON WELLS
(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			
2. Name of Operator TEXACO PRODUCING INC.		8. Well No. 147	
3. Address of Operator P. O. Box 3109 - Midland, Texas 79702		9. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES	
4. Well Location Unit Letter <u>H</u> : <u>1361</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line Section <u>2</u> Township <u>18-SOUTH</u> Range <u>34-EAST</u> NMPM LEA County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-4003'			

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: EXTEND PERMIT EXPIRATION DATE ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ 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.

DUE TO DRILLING PRIORITY AND SCHEDULING DELAYS, THIS WELL CANNOT BE SPUDDED BEFORE THE SEPTEMBER 6, 1990 EXPIRATION DATE.

PLEASE EXTEND THIS PERMIT FOR AN ADDITIONAL SIX (6) MONTHS.

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

SIGNATURE C. P. Basham/cwl TITLE DRILLING SUPERINTENDENT DATE 08-20-90

TYPE OR PRINT NAME C. P. BASHAM

TELEPHONE NO. 915-6884620

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

June 22nd 6, 1991