

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

<p align="center">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.)</p>		<p>WELL API NO. 30-025-32005</p>
<p>1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTION <input type="checkbox"/></p>		<p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p>
<p>2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.</p>		<p>6. State Oil / Gas Lease No. B-1306</p>
<p>3. Address of Operator 205 E. Bender, HOBBS, NM 88240</p>		<p>7. Lease Name or Unit Agreement Name NEW MEXICO 'R' STATE NCT-3</p>
<p>4. Well Location Unit Letter <u>P</u> : <u>1310</u> Feet From The <u>SOUTH</u> Line and <u>110</u> Feet From The <u>EAST</u> Line Section <u>1</u> Township <u>18-S</u> Range <u>34-E</u> NMPM <u>LEA</u> COUNTY</p>		<p>8. Well No. 28</p>
<p>10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3990'</p>		<p>9. Pool Name or Wildcat VACUUM DRINKARD</p>

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 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 checked="" type="checkbox"/> INSTALLED RISERS ON CASING STRINGS	

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.

5/9/96

INSTALLED RISERS TO THE SURFACE ON THE 8 5/8" SURFACE CASING AND THE 5 1/2" PRODUCTION CASING OF THE ABOVE INJECTION WELL.

MR. BUDDY HILL OF THE NMOCDC INSPECTED AND APPROVED THE INSTALLATION OF THE RISERS.

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 5/14/96

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

ORIGINAL SIGNED BY JERRY SEXTON
(This space for State Use) DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAY 17 1996

CONDITIONS OF APPROVAL, IF ANY: