

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.	3002532009
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	VACUUM GRAYBURG SAN ANDRES UNIT
8. Well No.	258
9. Pool Name or Wildcat	Vacuum Grayburg San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.) D.F 4005, K.B. 4006	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter <u>A</u> : <u>660</u> Feet From The <u>NL</u> Line and <u>510</u> Feet From The <u>EL</u> Line Section <u>1</u> Township <u>18-S</u> Range <u>34E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.) D.F 4005, K.B. 4006	

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 checked="" 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 type="checkbox"/>	ACID FRAC <input checked="" type="checkbox"/>

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.

5-04-00: MIRU. NDWH. NUBOP. WORK ON STUCK PUMP. RAN STRETCH. PUMP 200 BW DN CSG. WRK STUCK PUMP.
5-05-00: RAN FP. TAG @ 4523'. FP @ 4523' SHOWED FREE. TIH W/JET CUTTER & CUT 4513'. TIH W/4 5/8" LEAN IMP BLOCK ON WS. TAG @ 4488'.
5-08-00: TIH W/WL SPEAR, BS, & TBG. TAG @ 4488'. WRK TO 4494'. TIH W/MILL GUIDE, OVERSHOT W/EXTENSION, BS, JARS, DC'S, ACC SUB, & TBG. TAG @ 4488'. MILL 4488-4494. LATCH ONTO FSH. JAR.
5-09-00: REDRESS OVERSHOT. TIH W/OVERSHOT, EXT, BS, JARS, DC'S. LATCH ONTO FSH @ 4494'. JAR LOOSE.
5-10-00: TIH W/JARS, DC'S & TBG. TAG @ 4597'. WASH 4597-4600. CUT FISH NECK 4600-4602. TIH W/SPECIAL JOINT, JARS, DC'S & TBG TO 4016'.
5-11-00: TAG @ 4601'. WASH 4601-4608. PULL PIPE TO 4015'.
5-12-00: TIH W/OVERSHOT, BMPR SUB, JARS, DC'S & ACCEL SUB. LATCH ON FSH @ 4601'. JAR. REDRESS OVERSHOT. TIH W/BMPR, SUB, JARS, DC'S TO 4016'.
5-15-00: KILL W/50 BFW. LOWER TOOLS & LATCH ONTO FSH @ 4601'. TIH W/SPECIAL CUTRIGHT JT, JARS, DC'S ON TBG TO 4601'. CUT OVER FISH 4601-09'. C/O BOP. TIH W/BOX TAP, BMPR SUB, DC'S ON TBG TO 4003'.
5-16-00: KILL W/50 BFW. LATCH ONTO FSH. JAR LOOSE. TIH W/SAME TO 4610'.
5-17-00: TIH W/SAME.
5-18-00: TIH TO 4712'.
5-19-00: LOWER TBG & TOOLS & TAG @ 5450'. TIH W/FRAC PKR, & SN ON FRAC TBG. TEST TO 8000#. STOP PKR @ 4194'.
5-20-00: PSA 4194'. INSTL FRAC TREE ON TOP OF BOP & TEST TO 1000#-OK. HU BLOW DN LINE TO FRAC TANK.
5-22-00: PERFORM CO2 FOAM ACID FRAC ON PERFS 4284-4690 W/20,000 GALS FOAMED 20% HCL, 18,000 GALS 30# FOAM GEL PAD & 70 TONS CO2.
5-24-00: ND FRAC TREE. REL PKR. TIH W/TBG TO 3125'.
5-25-00: TIH W/MOTOR, GAS SEPR, PMP, SUB. MOTOR @ 4277". NDBOP. NUWH. PLACE ON PUMP 3:00 PM. RIG DOWN.
ON 24 HR OPT. PUMPED 47 BO, 836 BW, & 30 MCF. FINAL REPORT

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant DATE 6/19/00
TYPE OR PRINT NAME J. Denise Leake Telephone No. 397-0405

(This space for State Use)

APPROVED [Signature] TITLE [Signature] DATE [Signature]
CONDITIONS OF APPROVAL, IF ANY: _____