

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 1980
ALBUQUERQUE, NEW MEXICO 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT --" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: ☒ OIL WELL ☐ GAS WELL ☐ OTHER
2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.
3. Address and Telephone No. P.O. Box 3109, Midland Texas 79702 688-4608
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter I : 1980 Feet From The SOUTH Line and 330 Feet From The
EAST Line Section 30 Township 19-S Range 32-E

5. Lease Designation and Serial No.
NM-59045
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
8. Well Name and Number
FEDERAL (USA) 'J'
3
9. API Well No.
30-025-32447
10. Field and Pool, Exploratory Area
LUSK DELAWARE, WEST
11. County or Parish, State
LEA, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Attering Casing
	<input checked="" type="checkbox"/> OTHER: INTERMEDIATE CASING
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

1. DRILLED 11 INCH HOLE TO 4120'. TD @ 9:15 AM 07-03-94. 100% LOST CIRCULATION @ TD.
2. RAN 94 JOINTS OF 8 5/8, 32# K-55, LTC CASING SET @ 4120'. RAN 8 CENTRALIZERS. DV TOOL @ 2794'.
3. DOWELL CEMENTED: 1ST STAGE - 300 SACKS RFC CLASS H W/ 10% CALSEAL, 2% CACL2 (14.2 PPG, 1.61 CF/S). 400 SACKS 35/65 POZ CLASS H W/ 6% GEL, 5% SALT, 1/4# FLOCELE (12.8 PPG, 1.94 CF/S). F/B 200 SACKS CLASS H W/ 1% CACL2 (15.6 PPG, 1.19 CF/S). AFTER 1ST STAGE, OPENED DV TOOL. NO RETURNS - STILL HAVE LOST CIRCULATION. PUMPED 200 RFC CLASS H W/ 10% CALSEAL, 2% CACL2 (14.2 PPG, 1.61 CF/S). ESTABLISHED FULL RETURNS. 2ND STAGE - 900 SACKS 35/65 POZ CLASS H W/ 6% GEL, 5% SALT, 1/4# FLOCELE (12.8 PPG, 1.94 CF/S). F/B 100 SACKS CLASS H W/ 1% CACL2 (15.6 PPG, 1.19 CF/S). CIRCULATED 20 SACKS. PLUG DOWN @ 6:15 AM 07-04-94.
4. NU BOP AND TESTED TO 1500#. TESTED CASING TO 1500# FROM 10:45 AM TO 11:00 AM 07-05-94.
5. WOC TIME 28.5 HOURS FROM 6:15 AM 07-04-94 TO 10:45 AM 07-05-94.
6. DRILLING 7 7/8 HOLE.

RECEIVED
JUL 11 8 37 AM '94

14. I hereby certify that the foregoing is true and correct

SIGNATURE C. P. Basham / ADH TITLE Drilling Operations Mgr. DATE 7/7/94

TYPE OR PRINT NAME C. P. Basham

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.