

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.	30-025-32874
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-1306
7. Lease Name or Unit Agreement Name	NEW MEXICO 'R' STATE NCT-1
8. Well No.	17
9. Pool Name or Wildcat	VACUUM DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3978'	

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.)

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER INJECTION WELL

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
P.O. Box 3109, Midland Texas 79702

4. Well Location
Unit Letter G : 2530 Feet From The NORTH Line and 2530 Feet From The EAST Line
Section 6 Township 18-S Range 35-E NMPM LEA COUNTY

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 DRILLING PERMIT ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ 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, THIS WELL MAY NOT BE SPUDDED BEFORE THE SEPTEMBER 7, 1995 EXPIRATION DATE. THIS WELL WILL BE DRILLED IN SEPTEMBER OR EARLY OCTOBER. PLEASE EXTEND THIS DRILLING PERMIT AN ADDITIONAL SIX MONTHS.

Expires March 7, 1996

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

SIGNATURE C. Wade Howard TITLE Eng. Assistant

DATE 8/11/95

TYPE OR PRINT NAME C. Wade Howard

Telephone No. 688-4606

(This space for State Use)

APPROVED BY _____ TITLE _____

DATE AUG 16 1995

CONDITIONS OF APPROVAL, IF ANY: