

OIL CONSERVATION DIVISION

Submit 3 copies
appropriate
District Office

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-33114
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-1258-1
7. Lease Name or Unit Agreement Name	NEW MEXICO AE STATE
8. Well No.	27
9. Pool Name or Wildcat	WILDCAT TUBB
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3996' GR; 4011' KB	

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 <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>F</u> : <u>2170</u> Feet From The <u>NORTH</u> Line and <u>1650</u> Feet From The <u>WEST</u> Line Section <u>12</u> Township <u>18-S</u> Range <u>34-E</u> NMPM <u>LEA</u> COUNTY

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: CASING INTEGRITY TEST FOR A TA STATUS <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.

11-07-97

1. CIRCULATED HOLE W/INHIBITED FLUID & TESTED CASING FROM SURFACE TO CIBP SET @ 7200' AS PER NMOCD GUIDELINES TO 500# for 30 mins. Held OK.

2. REQUEST TEMPORARILY ABANDON WELL STATUS THROUGH 11-07-2002.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

(TEPI INTERNAL STATUS: TA)

This Approval of Temporary Abandonment Expires 2/25/2003

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 1/5/98
TYPE OR PRINT NAME J. Denise Leake Telephone No. 397-0405

(This space for State Use) APPROVED BY WILLIAMS

DISTRICT SUPERVISOR TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

