

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.	30-025-34098
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	E-7653
7. Lease Name or Unit Agreement Name	STATE 'AN'
8. Well No.	12
9. Pool Name or Wildcat	Mid Vacuum Devonian
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3959'

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 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>I</u> : <u>1950</u> Feet From The <u>SOUTH</u> Line and <u>450</u> Feet From The <u>EAST</u> Line Section <u>7</u> Township <u>18-S</u> Range <u>35-E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3959'

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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐ REQUEST TA STATUS ☒

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.

6-28-00: SET CIBP @ 11,435'. CIRC HLE W/PKR FLUID. CHART CSG. CLASSIFY WELL AS TEMPORARILY ABANDONED.

{ORIGINAL CHART AND COPY OF CHART ATTACHED}

This Approval of Temporary
Abandonment Expires

11/30/2005

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 7/11/00

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

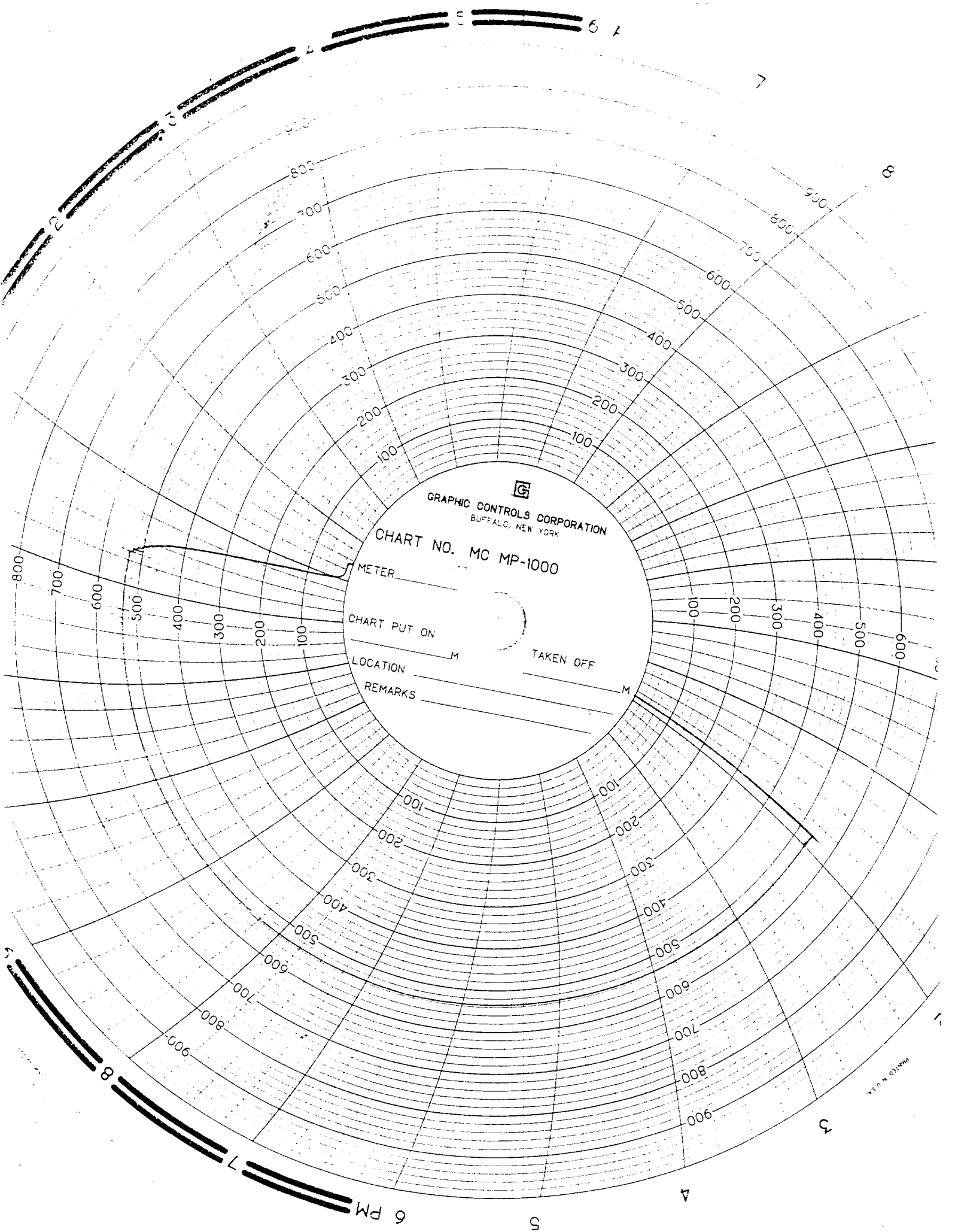
APPROVED

CONDITIONS OF APPROVAL IF ANY

TITLE

DATE

DeSoto-Nichols 12-93 ver 1.3



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC MP-1000

METER

CHART PUT ON

TAKEN OFF

LOCATION

REMARKS

MADE IN U.S.A.