

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.	3002502183
5. Indicate Type of Lease	STATE ☒ FEE
6. State Oil / Gas Lease No.	858150
7. Lease Name or Unit Agreement Name	WEST VACUUM UNIT
8. Well No.	7
9. Pool Name or Wildcat	VACUUM GRAYBURG SAN ANDRES
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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 ☒ GAS WELL ☐ OTHER ☐
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	PO BOX 3109, MIDLAND, TX 79702
4. Well Location	Unit Letter C : 990 Feet From The NORTH Line and 2310 Feet From The WEST Line Section 33 Township 17S Range 34E NMPM LEA COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPERATION ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		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.

8-24-01: MIRU. NDWH. NUBOP. REL PKR.

8-27-01: TIH W/BIT & CSG TO 3295'.

8-28-01: FINISH TIH W/BIT & CSG TO 4526'. TIH W/CIBP & PKR. SET CIBP @ 4215'. PULL PKR TO 4200'. TEST CIBP TO 1000 PSI-OK. REL PKR. TEST & CHART CSG TO 550 PSI FOR 30 MINS-OK. CHART ATTACHED.

8-29-01: LD WS. NDBOP. NUWH. RIG DOWN.

WELL IS TEMPORARILY ABANDONED.

This Approval of Temporary
Abandonment Expires 9/26/06

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 9/4/01
TYPE OR PRINT NAME J. Denise Leake Telephone No. 915-688-4752

(This space for State Use)

APPROVED _____ DATE SEP 26 2001
CONDITIONS OF APPROVAL, IF ANY: _____ TITLE _____

