

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 02209
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	858150
7. Lease Name or Unit Agreement Name	WEST VACUUM UNIT
8. Well No.	26
9. Pool Name or Wildcat	VACUUM GRAYBURG SAN ANDRES

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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	PO BOX 3109, MIDLAND, TX 79702
4. Well Location	Unit Letter L : 1980 Feet From The S Line and 660 Feet From The W Line Section 34 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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input 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.	

8-09-01: TEST CASING TO 560 PSI FOR 30 MINUTES - OK.
SET CIBP @ 4082'. PERFS: 4135-4700. CHART ATTACHED.
WELL IS TEMPORARILY ABANDONED.

This Approval of Temporary Abandonment Expires 8/21/08

I hereby certify that the information above is true and complete to the best of my knowledge and belief	
SIGNATURE <u>J. Denise Leake</u>	TITLE Engineering Assistant
DATE 8/15/01	Telephone No. 915-688-4752
TYPE OR PRINT NAME J. Denise Leake	
(This space for State Use)	
APPROVED	CONDITIONS OF APPROVAL IF ANY: TITLE DATE

TA CHART

TEXACO

DATE 8-9-01

WELL NAME West Vacuum Unit #26

SUPERVISOR W. Mitchell

PACKER TYPE CIBP

PACKER SETTING DEPTH 4082

PERFORATIONS Open hole 4135-4700

GRAPHIC CONTROLS CORPORATION
BUFFALO, N.Y. 14204

BR 2221

