

**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.                         | 30-025-20179   |
| 5. Indicate Type of Lease            | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil / Gas Lease No.         | B-2146   |
| 7. Lease Name or Unit Agreement Name | VACUUM GLORIETA WEST UNIT  |
| 8. Well No.                          | 86   |
| 9. Pool Name or Wildcat              | VACUUM GLORIETA  |

**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                             | P.O. BOX 730, HOBBS, NM 88240  |
| 4. Well Location                                   | Unit Letter <u>K</u> : <u>2310</u> Feet From The <u>SOUTH</u> Line and <u>2310</u> Feet From The <u>WEST</u> Line<br>Section <u>36</u> Township <u>17S</u> Range <u>34E</u> NMPM <u>LEA</u> COUNTY |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) | 4009' DF   |

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"/> | REMEDIAL WORK <input type="checkbox"/>               | ALTERING CASING <input type="checkbox"/>          |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPERATION <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/>     |
| PULL OR ALTER CASING <input type="checkbox"/>  |   | CASING TEST AND CEMENT JOB <input type="checkbox"/>  |   |
| OTHER: <input type="checkbox"/>                |   | OTHER: <input type="checkbox"/>                      | GEL TREATMENT <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.

11/8/95 - 11/14/95

1. TOH W/ RODS, PUMP, & TUBING.

2. TIH W/ TREATING PKR & SET @ 5747'. RAN WATER TRACER & DETERMINED POINT OF ENTRY OF WATER. ESTD PUMP RATE W/ FRESH WATER, PUMPED 855 BBLS OF GEL. OVERFLUSHED W/ 80 BBLS FRESH WATER. SI 72 HRS. TOH W/ PKR.

3. TIH W/ PRODUCTION EQUIPMENT. RETURNED WELL TO PRODUCTION.

OPT 12/6/95 PUMPING BY ROD PUMP: 43 BOPD, 181 BWPD, 15 MCFD

(INTERNAL TEPI STATUS REMAINS PM)

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

SIGNATURE Monte C. Duncan TITLE Engr Asst DATE 12/22/95  
TYPE OR PRINT NAME Monte C. Duncan Telephone No. 397-0418

ORIGINAL SIGNED BY MARY WINK DATE JAN 03 1996  
(This space for State Use)  
APPROVED BY REED II TITLE  DATE   
CONDITIONS OF APPROVAL, IF ANY: