

District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88241-1980
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131

New Mexico
Energy Minerals and Natural Resources Department
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

Form C-139
Revised 06/99

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
PRODUCTION RESTORATION PROJECT

I. Operator and Well:

M-0638

Operator name & address TEXACO EXPLORATION & PRODUCTION INC. PO BOX 3109 MIDLAND, TEXAS 79702						OGRID Number 022351		
Contact Party BOBBY MCCURRY						Phone 505-396-4414 EXT-103		
Property Name VACUUM GLORIETA WEST UNIT				Well Number 46		API Number 3002520249		
UL N	Section 25	Township 17S	Range 34E	Feet From The 990	North/South Line SOUTH	Feet From The 1650	East/West Line WEST	County LEA

II. Pool and Production Restoration:

Previous Producing Pool(s) (If change in Pools):

VACUUM GLORIETA

Date Production Restoration started:

03/20/00

Date Well Returned to Production:

04/15/00

Describe the process used to return the well to production (Attach additional information if necessary):

SQZ LOWER/COMPLETE UPPER GLORIETA

III. Identify the period and Division records which show the Well had thirty (30) days or less production for the twenty-four consecutive months prior to restoring production:

Records Showing Well produced less than 30 days during 24 month period:

[] Well file record showing that well was plugged [] ONGARD production data
[x] OCD Form C-115 (Operator=s Monthly Report)

Month/Year (Beginning of 24 month period):

10/04/95

Month/Year (End of 24 month period):

10/04/97

IV. Affidavit:

State of New Mexico)
) ss.

County of Lea)

Denise Wann, being first duly sworn, upon oath states:

1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have personal knowledge of the facts contained in this Application.
3. To the best of my knowledge, this application is complete and correct.

Signature Denise Wann Title Acting Senior Engineer Date 12-6-00

SUBSCRIBED AND SWORN TO before me this 6th day of December, 2000.

John Ayers
Notary Public

My Commission expires: 2-29-04

FOR OIL CONSERVATION DIVISION USE ONLY:

V. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Production Restoration Project. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that production was restored on: 3-20-2000.

Signature District Supervisor <u>Paul J. Harty</u>	OCD District <u>1</u>	Date <u>12/15/2000</u>
---	--------------------------	---------------------------

VI. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

MA

Submit 3 copies
to 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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-20249

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

B-270

7. Lease Name or Unit Agreement Name

VACUUM GLORIETA WEST UNIT

8. Well No.

46

9. Pool Name or Wildcat

VACUUM GLORIETA

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
205 E. Bender, HOBBS, NM 88240

4. Well Location

Unit Letter N : 1650 Feet From The WEST Line and 990 Feet From The SOUTH Line

Section 25 Township 17S Range 34E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-4005'

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: SQZ LOWER/COMPLETE UPPER GLORIETA ☒

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.

3-20-00: NDWH. NUBOP. TIH W/BIT, CSG SCRAPER, WS TO 5845'. TIH W/BIT, DC'S & TBG TO 1800'.
3-21-00: LOWER BIT. TAG UP @ 5845'. TEST CSG TO 500 PSI-15 MIN-OK. DRLD 20' CMT. TAG CIBP @ 5865'. DRILL CIBP. PUSH TO 6283'.
3-22-00: CIRC 10# BRINE. TIH W/PKR, SN, TBG. SET PKR @ 5843'. REL PKR. FLOWING. TIH W/CMT RET. SET @ 5840'. TIH W/CMT RET
STINGER, & TBG TO 5528'.
3-23-00: STING INTO RET @ 5840'. MIX CMT, 100 SX CL C W/.4% D-156, .3% D-65, .2% D-46, 100 SX CL C NEAT, FLSH W/20 BBLs. OBTAIN
SQZ @ 200 PSI. REV OUT 40 SX. TIH W/BIT, DC'S & TBG TO 3325'.
3-24-00: LOWER TBG. TAG @ 5840'. BREAK CIRC. DRILL ON RET. DRILL CMT TO 5872'.
3-27-00: DRILL CMT @ 5872' TO 5902'. BIT QUIT. TIH W/BIT, DC'S & TBG. DRILL CMT 5902-600. TEST CSG TO 500 PSI-OK. DISPL CSG W/2%
KCL.
3-28-00: TIH W/PERF GUN, PERF GLORIETA FORM @ 5869-5874, 5881-5950, 5962-74, 5980-88.
3-29-00: TIH W/PKR, SN, TBG, SET PKR @ 5812'. PSI CSG TO 500-OK. ACIDIZE GLORIETA PERFS 5869-5988 W/7000 GALS 15% NEFE HCL
ACID. FL @ SURF. END FL @ 5800'.
3-30-00: FL @ 4000'. SWAB DRY. REL PKR. TIH TO 5995'. RESET PKR @ 5812'. REL PKR. TIH TO 5995'. RESET PKR @ 5812'. PUMP 10 BBLs
INTO PERFS. END FL @ 5800'.
3-31-00: FL @ 4000'.
4-03-00: FL @ 3405'. END FL @ 5800'. RIG DOWN SWAB. REL PKR. NDBOP. SET TAC. NUWH. BTM OF STRING @ 9' KB. @ 5998'. SN @ 5993'.
TAC @ 5807'.
4-04-00: UNLOAD RDS. TIH W/NIP, SUB, K-BARS, RDS. / LOAD/TEST 500 PSI-OK. RIG DOWN.
4-15-00: ON 24 HR OPT. PUMPED 6 BO, 17 BW, & 5 MCF. PERFS 5965-6256' VACUUM GLORIETA.
FINAL REPORT

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 5/8/00

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL IF ANY:

TITLE ORIGINAL SIGNED BY CHIEF'S WILLIAMS
DISTRICT I SUPERVISOR

DATE MAY 22 2000

DeSoto/Nichols 12-93 ver 1.0