

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.

3002521637

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

B-155

7. Lease Name or Unit Agreement Name

VACUUM GLORIETA WEST UNIT

8. Well No.

87

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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator  
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator  
P.O. BOX 730, HOBBS, NM 88240

4. Well Location

Unit Letter J : 2090 Feet From The SOUTH Line and 2086 Feet From The EAST Line

Section 36 Township 17S Range 34E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4002' KB

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: ☒ GEL TREATMENT

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.

8/2/95 - 8/8/95

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

2. RAN WATER TRACER & DETERMINED POINT OF ENTRY OF WATER @ TOP & BOTTOM OF PERFS.

3. TIH W/ TREATING PKR & SET ABOVE TOP PERF @ 5930'. PUMPED 1000 BBLS OF GEL. OVERFLUSHED W/ 40 BBLS UNCROSSLINKED GEL. THEN OVERFLUSHED W/ 40 BBLS LEASE CRUDE. SI 72 HRS.

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

OPT 8/15/95 PUMPING BY ROD PUMP: 48 BOPD, 80 BWPD, 22 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 9/18/95

TYPE OR PRINT NAME

Monte C. Duncan

Telephone No. 397-0418

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE SEP 21 1995

CONDITIONS OF APPROVAL, IF ANY: