

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.

30-025-25731

5. Indicate Type of Lease

STATE ☐

FEE ☐

6. State Oil / Gas Lease No.

B-155

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 INJECTION

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC

3. Address of Operator
205 E. Bender, HOBBS, NM 88240

4. Well Location

Unit Letter J Feet From The SOUTH Line and 1330 Feet From The EAST Line

Section 36 Township 17S Range 34E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3988' GL

7. Lease Name or Unit Agreement Name

CENTRAL VACUUM UNIT

8. Well No.
83

9. Pool Name or Wildcat
VACUUM GRAYBURG SAN ANDRES

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: ☐

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.

9/25/97

1. NOTIFIED NMOCD MIRU. RELEASED INJECTION PKR & TOH W/ INJECTION EQUIPMENT.
2. RECOVERED LOGGING TOOLS. TIH W/PKR AND INJECTION TBG. SET PKR @ 4206' TESTED CSG FROM SURFACE TO PKR AS PER NMOCD GUIDELINES TO 500# FOR 30-MINS, HELD OK.
3. RETURNED TO INJECTION.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

(INTERNAL TEPI STATUS REMAINS: INJ)

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

SIGNATURE Bobby G. McCurry TITLE Engineering Assistant

DATE 10/9/97

TYPE OR PRINT NAME Bobby G. McCurry

Telephone No. 397-0446

(This space for State Use)
APPROVED BY CHRIS WILLIAMS

APPROVED BY _____ TITLE _____

DATE OCT 23 1997

CONDITIONS OF APPROVAL, IF ANY:

