

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.

30-025-27975

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

B-870

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.)

7. Lease Name or Unit Agreement Name

VACUUM GRAYBURG SAN ANDRES UT

1. Type of Well: OIL ☐ GAS ☐ OTHER ☐ INJECTION

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

8. Well No.
65

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

9. Pool Name or Wildcat
VACUUM GRAYBURG SAN ANDRES

4. Well Location
Unit Letter M ; 1310 Feet From The SOUTH Line and 120 Feet From The WEST Line
Section 35 Township 17S Range 34E NMPM LEA COUNTY

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

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.

9/8/94 - 9/13/94

1. MIRU, INSTALLED BOP, RELEASED PKR & TOH W/ INJ EQUIP. C/O TO 4767' (PBTD) & CIRCD HOLE CLEAN.

2. TIH W/ TP, PKR, & WS. SET TREATING PKR @ 3929', TSTD ANNULUS W/ 500 PSI.
ACIDIZED PERFS 4401'-4744' W/ 7470 GALS 20% NEFE. MAX P = 3212#, AIR = 3.8 BPM. SI WELL. FLOWED BACK LOAD.
TOH W/ TREATING PKR & WS.

3. TIH W/ BAKER LOCKSET INJECTION PKR ON 2 3/8" RICE DUOLINE INJECTION TUBING.

4. CIRCD HOLE W/ PKR FLUID, SET PKR @ 4280', TSTD CSG TO 500# FOR 30 MIN, HELD OK.

5. RETURNED WELL TO INJECTION.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

OPT 9-25-94 INJECTING 465 BWPD @ 1450 PSI

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 12/7/94

TYPE OR PRINT NAME Monte C. Duncan

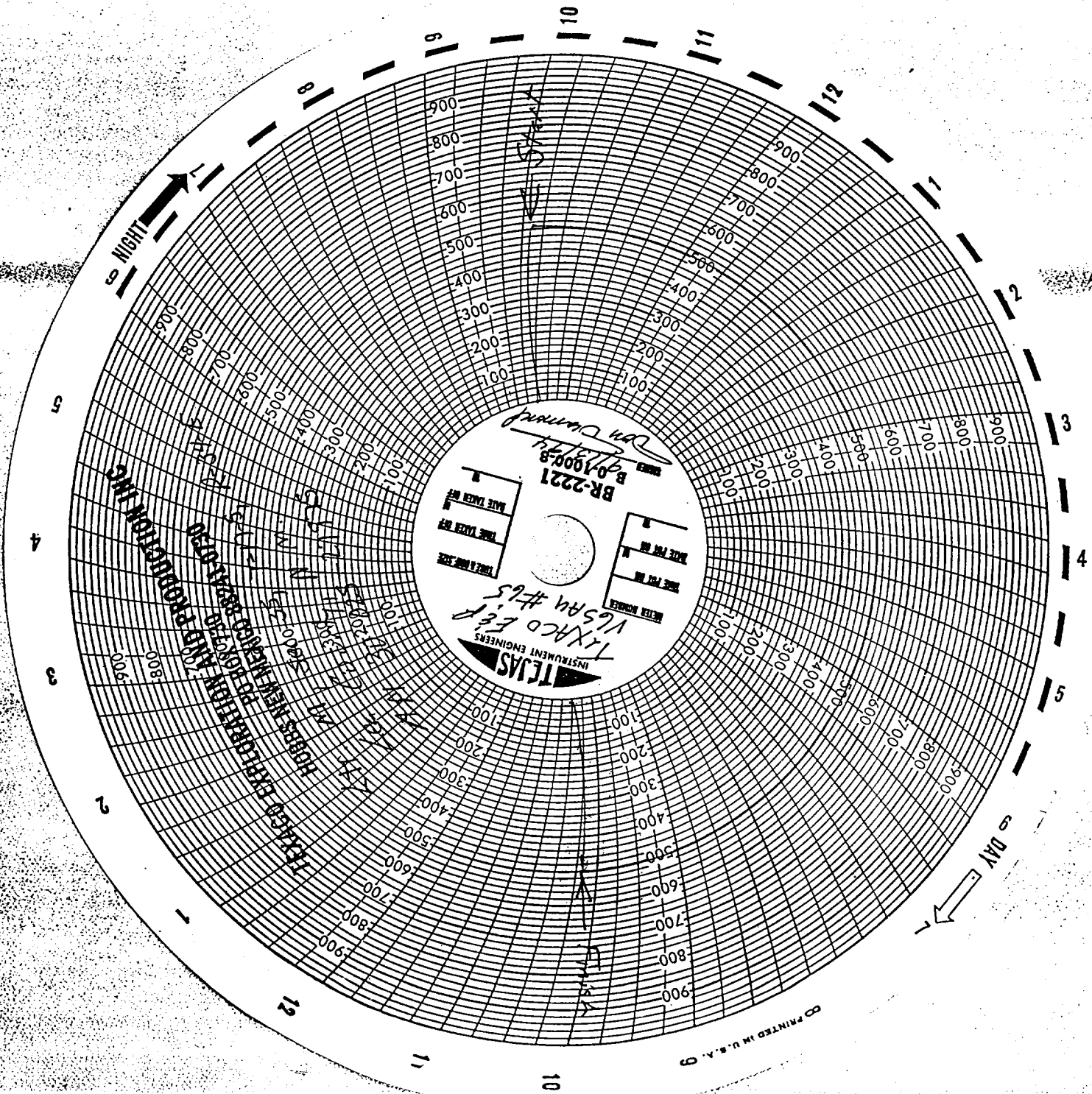
Telephone No. 397-0418

(This space for State Use)

APPROVED BY Monte C. Duncan TITLE Engr Asst

DATE DEC 08 1994

CONDITIONS OF APPROVAL, IF ANY:



CO PRINTED IN U.S.A. 9

