

UNITED STATES N. M. DEPT. OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Form approved 30-023-20641  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-56749
2. NAME OF OPERATOR Texaco Producing, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 728, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  Unit Letter F, 2310' FNL, 2210' FWL		8. FARM OR LEASE NAME Federal (USA) "L"
14. PERMIT NO.		9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3679' GR (KB 13.5')		10. FIELD AND POOL, OR WILDCAT Tonto-Seven Rivers
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T19S, R33E
		12. COUNTY OR PARISH Lea
		13. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANE	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Drilling	<input checked="" type="checkbox"/>		

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent data, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and known pertinent to this work.)

1. Drill 7-7/8" hole from 1508'-3749'.
2. Core 3750' - 3782' with 7-27/32" bit and 6-1/4" barrel.
3. Ream 3750' - 3782' to 7-7/8" and drill to 3867' TD.
4. Ran GR/DLL/MLL/CAL and GR/CNL/ZDLC from 3864' to 1507'.
5. Ran 95 jts 5-1/2", 15.5#, J-55, LT & C casing. Set at 3867'.
6. Cement with 550 sx Class "H" LW with 15# salt & 1/4# flocele (12.7 ppg, 2.1 cf/sk). Tailed in with 250 sx Class "H" & 1/4# Flocele (15.6 ppg, 1.18 cf/sk). BP with 1700 psi at 5:15PM on 7-25-89. Circulated 70 sx.
7. Released Basin Rig No. 18 at 11:00 PM on 7-25-89.

RECEIVED  
SEP 15 11 07 AM '89  
CARTER AREA SUPERINTENDENT

18. I hereby certify that the foregoing is true and correct

SIGNED J. A. Head TITLE Area Superintendent DATE 7-31-89  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

SSS