State of New Mexico Energy, Minerals and Natural Resources Department

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Submit 3 Copies to Appropriate District Office

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DISTRICT P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVA	TION DIVISION			
	2040 Pacheco St. Santa Fe, NM 87505		WELL API NO. 30-025-31458	3	
DISTRICT II Santa Fe, INM 87505 P.O. Drawer DD, Artesia, NM 88210			sIndicate Type of Lease		
				STATE	FEEX
1000 Rio Brazos Rd., Aztec, NM 87410			sState Oil & Gas Le	ase No.	
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" (FORM C-101) FOR SUCH PROPOSALS.)			√Lease Name or Unit Agreement Name West Lovington Unit 40990		
Type of Well: OIL GAS			4		
WELL X WELL	OTHER				
2Name of Operator Titan Resources I, Inc.			sWell No. 93		
3Address of Operator 500 W. Texas, Ste. 200, Midland, TX 79701			Pool name or Wildcat		
Well Location	Lovington, Upper San Andres, West				
Unit Letter M 1305 Fee	et From The South	Line and 1305	Feet From The	west	Line
Section 5	Township 17S	Range 36E	NMPM	Lea	County
	10Elevation (Show whether	r DF, RKB, RT, GR, etc.)			
¹¹ Check Appr	opriate Box to Indicate	Nature of Notice, Re	port, or Other	Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				ALTERING CASI	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING O			
PULL OR ALTER CASING					
OTHER:		OTHER: Temporarily		sure chart	X
¹² Describe Proposed or Completed Operations (C/ work) SEE RULE 1103.	early state all pertinent details, and				
Pulled rods & pump; pulled tbg, TAC. TIH w/ PDQ CIBP, 151 its 2-7/8" tbg, se gal pkr fluid; took 61 bbis to break circ. and gauge.	at CIRP @ 4600' atung out				xed w/ 27.5 w/ tap BP
8-5/8" 24# @ 1315' 5-1/2" 15/5# @ 5230' perfs: 4787' - 5128' CIBP @ 4690' Initial pressure: 560 psi 15 min: 560 psi 30 min: 560 psi					
TA'd 6/10/98. Maintain current status to	accomodate possible CO2	tertiary recovery.			
Subsequent report filed 1/17/2000.			- frances		
				2-18-20	05
I hereby certify that the information above is true a	ind complete to the best of my knc	wledge and belief.	<u> </u>		
SIGNATURE HUA	lepper	TITLE Regulatory Analyst		DATE 02-04-	00
TYPE OR PRINT NAME LAURA Clepper	· ·			TELEPHONE NO. 915	5/498-8662
(This space for State Use)					
APPROVED BY	n and an early 1955 2014 - Charles Charles Charles	TITLE		DATE	
CONDITIONS OF APPROVAL. IF ANY					





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