

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.	30-025-31700
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-2706
7. Lease Name or Unit Agreement Name	VACUUM GLORIETA WEST UNIT
8. Well No.	39
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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTION <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	P.O. BOX 730, HOBBS, NM 88240
4. Well Location	Unit Letter <u>M</u> : <u>1194</u> Feet From The <u>SOUTH</u> Line and <u>1055</u> Feet From The <u>WEST</u> Line Section <u>25</u> Township <u>17S</u> Range <u>34E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	4002' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>
OTHER: <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input checked="" type="checkbox"/> REPAIRED INJ PACKER & TESTED CASING

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.

3-14-95

1. MIRU. RELEASED INJECTION PKR & TOH W/ INJ EQUIP.
 2. REPAIRED & UPGRADED INJECTION PACKER.
 3. TIH W/ 2 3/8" CEMENT LINED TUBING STRING AND REPAIRED INJ PKR, CIRCD HOLE W/ PKR FLUID, SET PKR @ 5909'.
 4. TESTED 5 1/2" CASING FROM SURFACE TO PKR SET @ 5909' AS PER NMOCD GUIDELINES TO 590# FOR 30 MINUTES, HELD OK.
 5. RETURNED WELL TO INJECTION.
- (ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)
- (INTERNAL TEPI STATUS REMAINS: INJ)

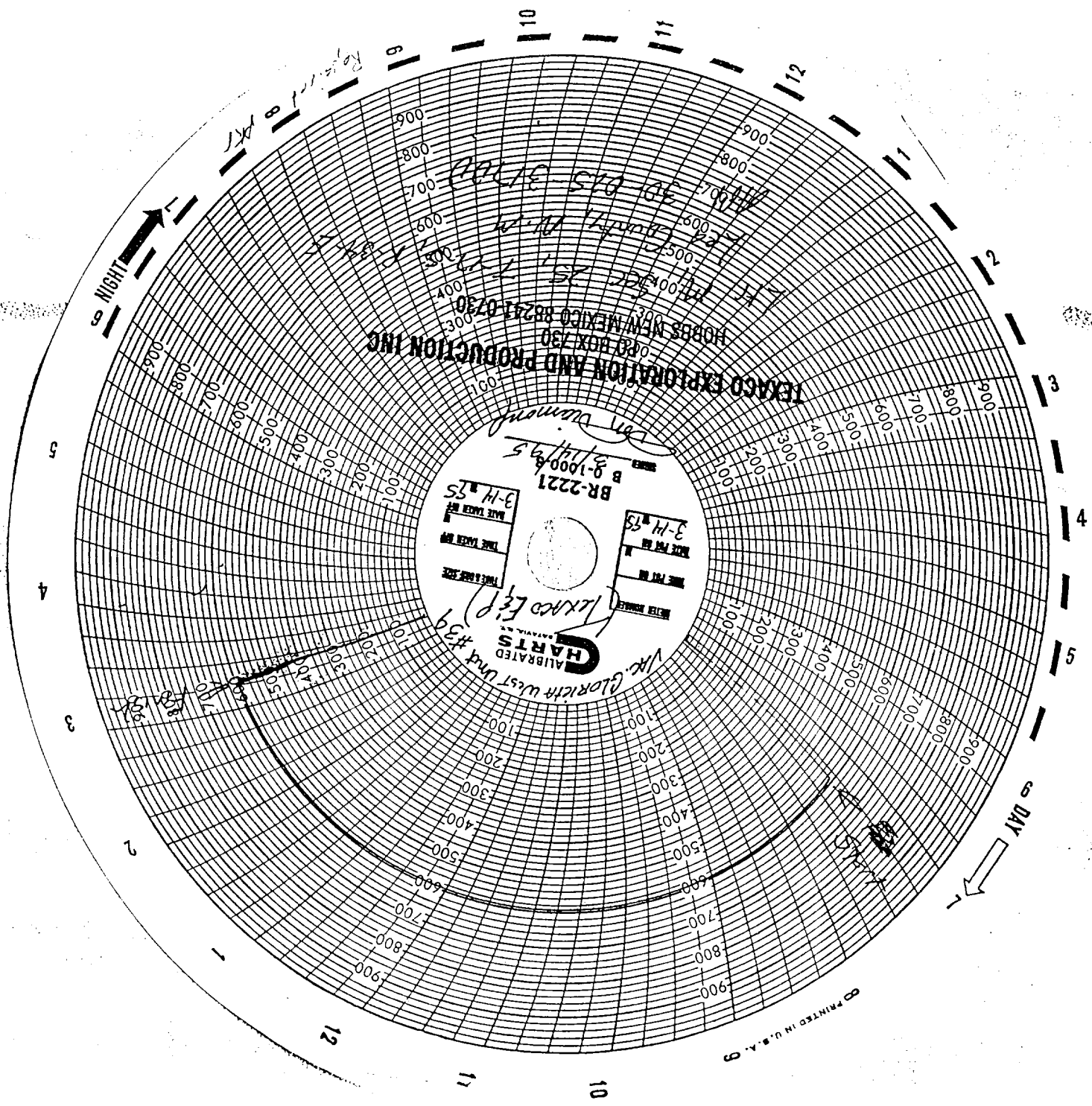
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Monte C. Duncan TITLE Engr Asst DATE 4/25/95
TYPE OR PRINT NAME Monte C. Duncan Telephone No. 397-0418

(This space for State Use)
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAY 01 1995
CONDITIONS OF APPROVAL, IF ANY:

MP



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