

DISTRICT I
P.O. Box 1980, Hobbs, NM 88241-1980
DISTRICT II
P.O. Box Drawer DD, Artesia, NM 88211-0719
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
DISTRICT IV
P.O. Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-101
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address TEXACO EXPLORATION & PRODUCTION INC. 205 E. Bender, HOBBS, NM 88240		² OGRID Number 022351
⁴ Property Code 11047		³ API Number 30-025-33434
⁵ Property Name NEW MEXICO N STATE		⁶ Well No. 10

⁷ Surface Location									
Ul or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
M	30	17S	35E		800	SOUTH	510	WEST	LEA

⁸ Proposed Bottom Hole Location If Different From Surface									
Ul or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
⁹ Proposed Pool 1 VACUUM WOLFCAMP					¹⁰ Proposed Pool 2				

¹¹ Work Type Code P	¹² WellType Code O	¹³ Rotary or C.T. ROTARY	¹⁴ Lease Type Code S	¹⁵ Ground Level Elevation 3989'-GR
¹⁶ Multiple No	¹⁷ Proposed Depth	¹⁸ Formation WOLFCAMP	¹⁹ Contractor	²⁰ Spud Date 2/25/99

²¹ Proposed Casing and Cement Program					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
14 3/4"	11 3/4"	42#	1500'	CL-C 80C SX, CIR 110	
11"	8 5/8"	32#	5300'	CL-H 1800 SX, CIR 262	
7 7/8"	5 1/2"	17#	11,536'	CL-H 2050SX, CIR 350	

²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

TEXACO INTENDS TO RECOMPLETE THE SUBJECT WELL IN THE VACUUM WOLFCAMP POOL. THE INTENDED PROCEDURE IS AS FOLLOWS:

1. MIRU PU. TOH W/RDS & PMP. NUBOP. TOH W/TBG.
2. RU REV UNIT. TIH W/BIT & CSG SCRAPER ON WS & C/O TO PBTD @ 11,065'. TOH W/BIT & SCRAPER.
3. TIH W/CSG GUN W/2 JSPF @ 120 DEG SPIRAL PHASING. PERF VACUUM WOLFCAMP FR 9330-9698'
4. TIH W/RBP & TRTNG PKR ON TBG. SET RBP @ 9900' & TEST. PULL UP & SET PKR @ 9280'. LOAD BACKSIDE & TEST PKR TO 500# SURF PRESS.
5. ACIDIZE WOLFCAMP PERFS W/9200 GALS 15% NEFE HCL.
6. SWAB BACK LOAD & CHECK FOR SHOWS.
7. REL PKR & TOH W/TBG.
8. TIH W/TBG & BHA. TIH W/RDS & PMP. PLACE WELL ON TEST.

Permit Division - Santa Fe, New Mexico
Date: 2/23/99
Plugback

²³ I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature *J. Denise Leake*

Printed Name J. Denise Leake

Title Engineering Assistant

Date 2/23/99

Telephone 397-0405

OIL CONSERVATION DIVISION

Approved By: *DAVID L. WILLIAMS*

Title:

Approval Date: FEB 24 1999

Expiration Date:

Conditions of Approval:

Attached ☐

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Fee Lease - 3 Copies

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OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-33434	² Pool Code 62340	³ Pool Name VACUUM WOLFCAMP
⁴ Property Code 11047	⁵ Property Name NEW MEXICO N STATE	⁶ Well No. 10
⁷ OGRID Number 022351	⁸ Operator Name TEXACO EXPLORATION & PRODUCTION INC.	⁹ Elevation 3989'-GR

¹⁰ Surface Location

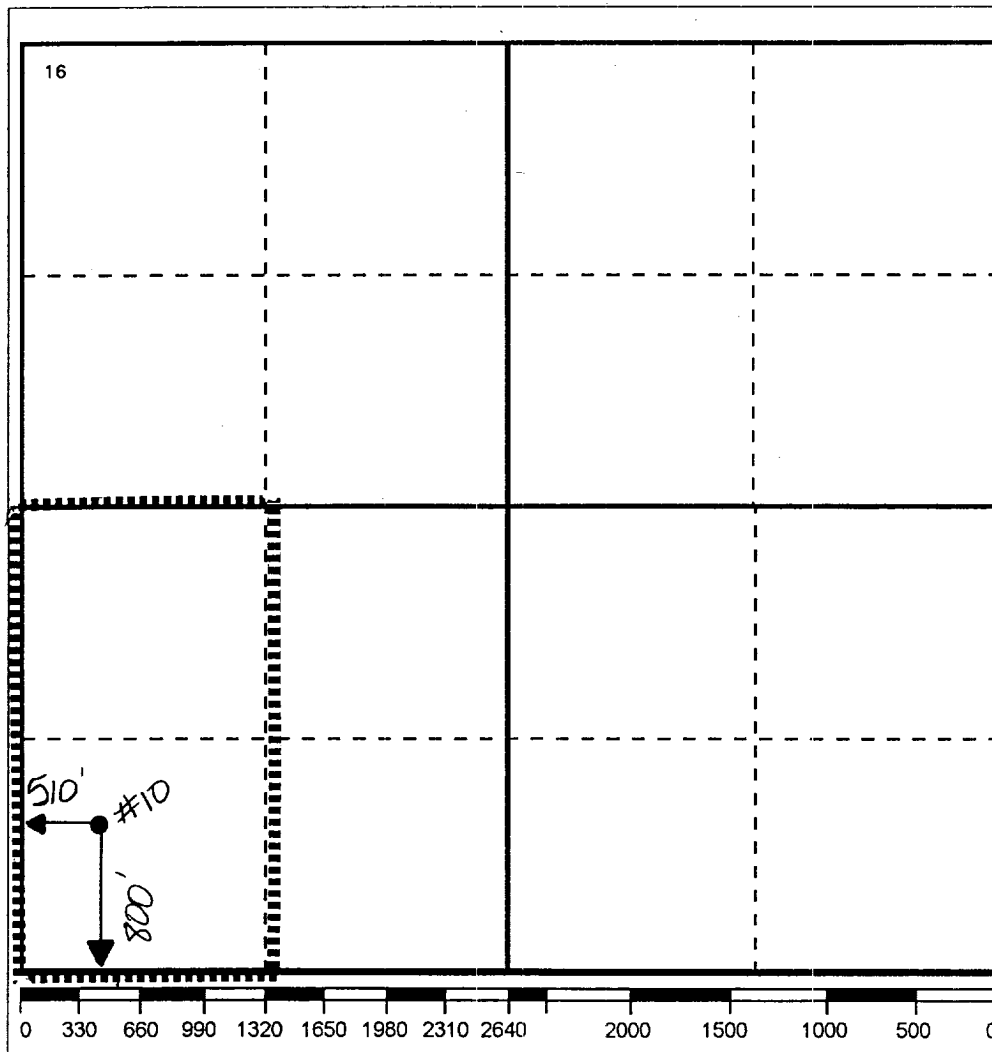
UL or lot no. M	Section 30	Township 17S	Range 35E	Lot.Idn	Feet From The 800	North/South Line SOUTH	Feet From The 510	East/West Line WEST	County LEA
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
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¹² Dedicated Acres 80	¹³ Joint or Infill No	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

¹⁷ OPERATOR CERTIFICATION

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

Signature

Printed Name

J. Denise Leake

Position

Engineering Assistant

Date

2/23/99

¹⁸ SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Signature & Seal of

Professional Surveyor

Certificate No.