

DISTRICT I
P. O. Box 1980, Hobbs, NM 88240

DISTRICT II
P. O. Drawer DD, Artesia, NM 88210

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

PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

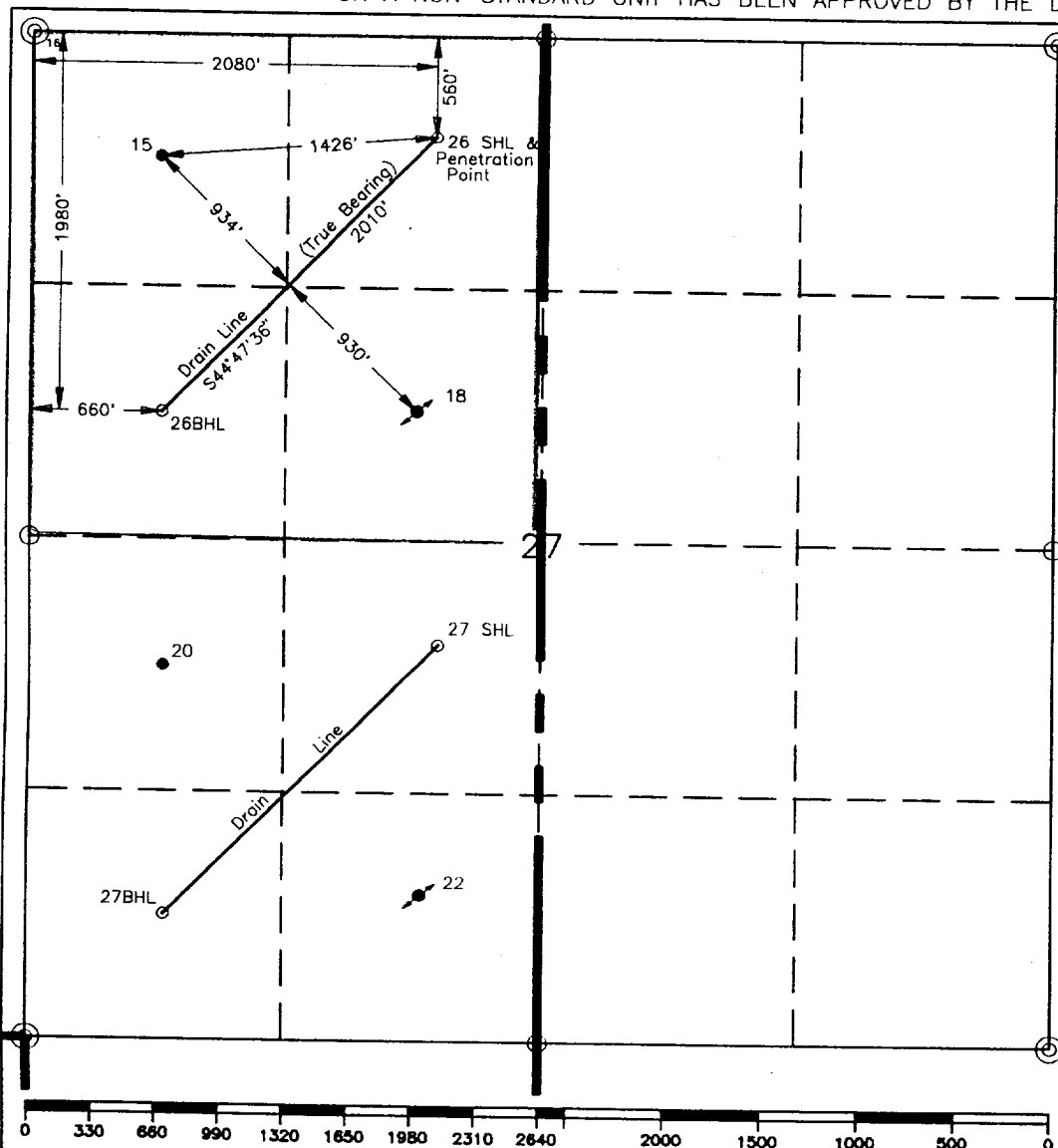
State Lease-4 copies
Fee Lease-3 copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-225-33637		² Pool Code 61760		³ Pool Name Vacuum Abo, North					
⁴ Property Code 11123		⁵ Property Name North Vacuum Abo West Unit						⁶ Well Number 26	
⁷ OGRID No. 23351		⁸ Operator Name TEXACO EXPLORATION & PRODUCTION, INC.						⁹ Elevation 4042'	
¹⁰ Surface Location									
UL or lot no. C	Section 27	Township 17-S	Range 34-E	Lot Idn	Feet from the 560'	North/South line North	Feet from the 2080'	East/West line West	⁷ County Lea
¹¹ Bottom Hole Location If Different From Surface									
UL or lot no. E	Section 27	Township 17-S	Range 34-E	Lot Idn	Feet from the 1980'	North/South line North	Feet from the 660'	East/West line West	⁷ County Lea
¹² Dedicated Acres 160		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

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.



¹⁰ OPERATOR CERTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
Signature <i>C. Wade Howard</i>	
Printed Name C. Wade Howard	
Position Engineer's Assistant	
Company Texaco Expl. & Prod. Inc.	
Date September 10, 1996	
¹¹ 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 August 30, 1996	
Signature & Seal of Professional Surveyor <i>John S. Piper</i>	
Certificate No. 7254 John S. Piper	
Sheet	

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Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-33637
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	NORTH VACUUM ABO WEST UNIT
8. Well No.	26
9. Pool Name or Wildcat	NORTH VACUUM ABO

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI
(FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	P.O. Box 2100, Denver Colorado 80201
4. Well Location	Unit Letter <u>C</u> : <u>560</u> Feet From The <u>NORTH</u> Line and <u>2080</u> Feet From The <u>WEST</u> Line Section <u>27</u> Township <u>17-S</u> Range <u>34-E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	4042'

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: ☐ COMPLETION ☒

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.

1. RU SCHLUMBERGER. RUN GR-TDT 10638'-8400'. 01-11-97.
2. ACID FRAC W/120,000 GALS 20% ACID AND 120,000 GALS W/F 130, 70,000 GALS DOWN TBG. 01-19-97.
3. TOH W/ TBG. TIH W/ MUD ANCHOR, PER SUB, SN JTS OF 2-7/8" TBG. TAC @ 8480', SN @ 8543'. 01-23-97.
4. TIH W/ 2 1/2" X 1 1/2" X 24' PUMP, K-BARS, RODS. 01-24-97.
5. RAN 2 1/2" X 1 1/2" X 24' PUMP, KBARS, RODS, PONY. SET PUMP JACK. HOOK UP WELLHEAD TO FLOWLINE. 01-25-97.
6. OPT: PUMPED 223 BO, 40 BW, 216 MCF IN 24 HOURS. 02-05-97.

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

SIGNATURE C.P. Buchanan / 1997 TITLE Eng. Assistant. DATE 2/12/97
TYPE OR PRINT NAME Sheilla D. Reed-High Telephone No. (303)621-4851

(This space for State Use)

ORIGINAL SIGNED BY JERRY CANTON
DISTRICT I OIL CONSERVATION DIVISION

APPROVED

CONDITIONS OF APPROVAL, IF ANY: _____ TITLE _____ DATE _____

FEB 27 1997