

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 04042
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	WILLIAM WEIR
8. Well No.	2
9. Pool Name or Wildcat	EUMONT YATES 7 RVRS ON (PRO GAS)
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3712 DF

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 ☐ GAS WELL ☒ OTHER

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

4. Well Location
Unit Letter N : 660 Feet From The SOUTH Line and 1980 Feet From The WEST Line
Section 23 Township 19S Range 36E NMPM LEA COUNTY

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: ☐

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.

WORK PERFORMED: 2/2/94 - 3/10/94

1. MIRU, TOH W/ PROD. EQUIP. C/O TO 3925.
3. FRACD OPEN HOLE W/ 25000 GALS 40# LINEAR GEL, 25000 GAL CO2, AND 154000# 12/20 SAND, MAX P = 3200#
AVIR = 30 BPM.
4. TOH WITH WORKSTRING. CLEAN OUT TO TD. TIH WITH PRODUCTION EQUIPMENT AND PLACE ON TEST.
1 BO, 0 BW, 122 MCF

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

SIGNATURE Darrell J. Carriger TITLE Engineering Assistant DATE 3/28/94
TYPE OR PRINT NAME Darrell J. Carriger Telephone No. 397-0431

(This space for State Use)

APPROVED BY JERRY SEXTON TITLE DISTRICT I SUPERVISOR DATE APR 01 1994
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

MAR 31 1924

**OFFICE OF
THE SECRETARY**