

WELLFILE CONTACT INFORMATION

OPERATOR NAME: TEXACO

WELL ID: J.R. PHILLIPS WELL #12

U.L. F 5-6 T-205 R-37E

DATE CALLED: 10-15-99

PERSON CONTACTED: LARREL CARRIGER

LOCATION: TEXACO HOBBS OFFICE

PH. #: 397-0426

REASON FOR CONTACT: NON COMPLIANCE OF ST.

WELL 5-11-95. ASKED TEXACO

TO SEND 103 OF THEIR PLANS

TO BRING INTO COMPLIANCE.

LETTER: ☐ YES ☒ NO MAILED: _____

ATTN TO: _____

LOCATION: _____

INITIAL: GWV