

Submit 3 copies to appropriate District Office

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

OIL CONSERVATION DIVISION

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

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

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30 025 12722
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B - 154
7. Lease Name or Unit Agreement Name	NEW MEXICO -E- STATE NCT-1
8. Well No.	5
9. Pool Name or Wildcat	EUMONT YATES 7RIVERS QN
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	3579' 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 K : 1980 Feet From The SOUTH Line and 2082 Feet From The WEST Line  
Section 1 Township 20S Range 36E NMPM LEA COUNTY

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>perf. Eumont, acidize and frac stimulate</u> <input checked="" type="checkbox"/>	

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.

OBJECTIVE: TO OPEN EUMONT PERFORATIONS AND THEN STIMULATE THE NEW PERFS AND FORMATION WITH AN ACID JOB AND A FRACTURE TREATMENT.

9/12/94 KILL WELL. INSTALL BOP.

9/13/94 TOH WITH PRODUCTION EQUIPMENT. TIH WITH BIT AND CASING SCRAPER TO 6955'. TOH.

9/14/94 TIH WITH CIBP AND SET @ 6950' AND CAP WITH 35' CEMENT. TEST TO 500# (HELD). TIH WITH CIBP AND SET @ 3485' AND CAP WITH 35' CEMENT.

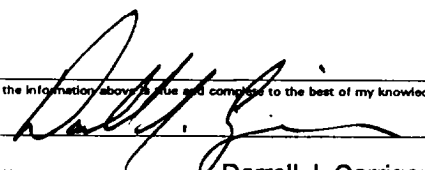
9/15/94 PERFORATE 3260' - 3280' WITH 2 JSPF (40 HOLES). TIH WITH TREATING PACKER AND SET @ 3153'.

9/17/94 ACIDIZE STIMULATE ZONE WITH 1000 GALLONS 15% NEFE AND 150 # ROCK SALT. Pmax = 1500#, Pavg = 1100, AIR = 8.5BPM. FRACTURE STIMULATE ZONE WITH 27500 GALLONS 40# GEL, 100 TONS CO2, 206938# 12/20 SAND. Pmax = 5200#, Pavg = 4500#, AIR = 32 BPM.

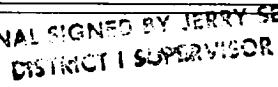
9/19/94 TOH WITH TREATING PACKER AND TIH WITH 2-3/8" TUBING AND PRODUCTION PACKER SET @ 3204'.

9/22/94 FINAL TEST: 0 BO, 0 BW, 796 MCF (24 HOUR, FLOWING)

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

SIGNATURE  TITLE Engineering Assistant DATE 12/6/94

TYPE OR PRINT NAME Darrell J. Carriger Telephone No. 397-0426

(This space for State Use) **ORIGINAL SIGNED BY JERRY SEXTON**  
APPROVED BY  TITLE DISTRICT I SUPERVISOR DATE DEC 14 1994

CONDITIONS OF APPROVAL, IF ANY: