

Submit 3 Copies To Appropriate District
Office

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO.
30-025-21426

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
NM-880140

7. Lease Name or Unit Agreement Name:

C. H. Weir "E"

8. Well No.

7

9. Pool name or Wildcat
Skaggs-Drinkard

SUNDRY NOTICES AND REPORTS ON WELLS
(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 3109, Midland, Texas 79702

4. Well Location

Unit Letter J : 1980 feet from the South line and 2307 feet from the East line

Section 11 Township 20S Range 37E NMPM Lea County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. Set 2 7/8" CIBP East string @ 6625' (Drinkard) fill 2 7/8" Csg w/80 Sx plug 6625'-3500' WOC Tag
2. RIH W/Tbg North string Tag CIBP @ 3566' (Glrta) fill 2 7/8" Csg w/70 Sx plug 3566'-1500' WOC Tag
3. RIH Tag TOC @ 3125' West string (Tubb) fill 2 7/8" Csg w/40 Sx. Plug 3125'-1500' WOC Tag
4. RU on East string. Perf 6 holes @ 3400', Sqz 75 Sx 3400'-2900' (Queen) WOC Tag
5. Perf 6 holes East string @ 2900', Sqz 75 Sx 2900'-1500' WOC Tag (Yates-B-Salt)
6. Cut 3 - 2 7/8" Csgs @ 1500', displace hole w/MLF 9.5# Brine w/25# Gel P/BBL
7. Spot 100 Sx plug 1500'-1200' (9 5/8", T-Salt) WOC Tag
8. 10 Sx plug 10'-Surf. Install dry hole marker.

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

SIGNATURE James T. Corbett TITLE FACILITY ENGINEER DATE 3/19/01

Type or print name JAMES T. CORBITT Telephone No. 915 688-4438

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any:

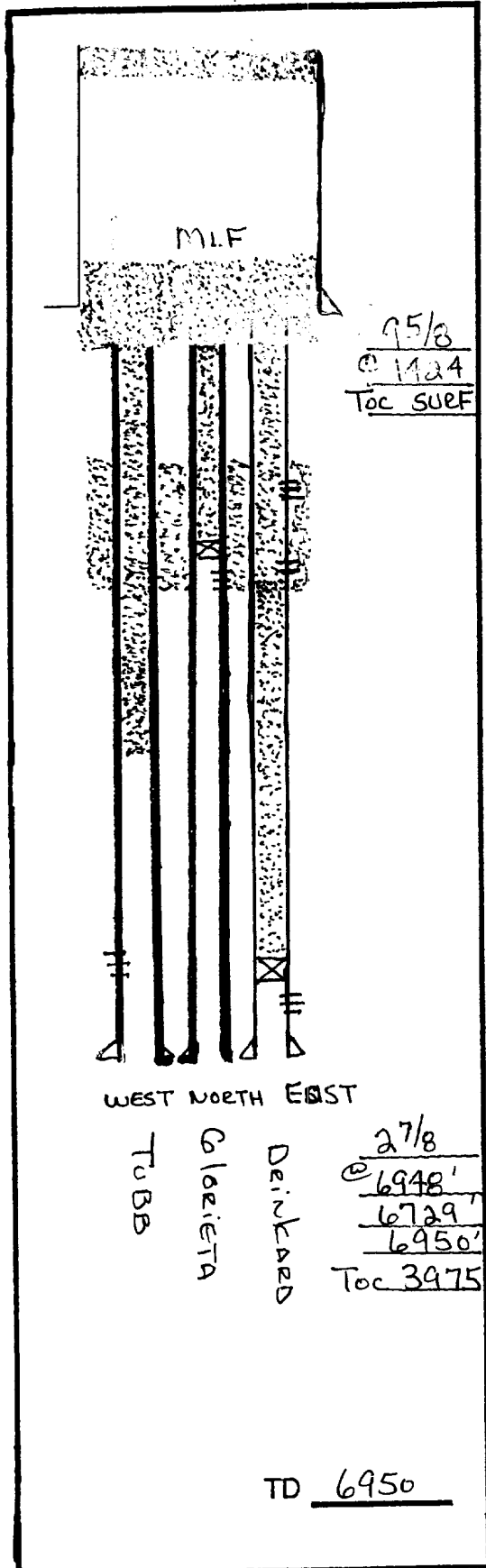
MP

OPERATOR TEXACO EXPLORATION & PRODUCTION
LEASENAME C. H. WEIR "B"

SECT 11 TWN 205 RNG 37E
FROM 1980 NSL 2307 EWL
TD: _____ FORMATION @ TD Drinkard
PBTD: _____ FORMATION @ PBTD _____

	SIZE	SET @	TOC	TOC DETERMINED BY	
SURFACE	9 5/8	1424	SURF	CIRC	
INTMED 1	2 7/8	6948	3975	CALC	
INTMED 2	2 7/8	6729	3975	CALC	
PROD	2 7/8	6950	3975	CALC	
	SIZE	TOP	BOT	TOC	DETERMINED BY
LINER 1					
LINER 2					
	CUT & PULL @			TOP - BOTTOM	
INTMED 1	1500		PERFS	6683 - 6928	
INTMED 2	1500		OPENHOLE	-	
PROD	1500				

RUSTLER (ANHYD)	
YATES	
QUEEN	
GRAYBURG	
SAN ANDRES	
CAPTAN REEF	
DELAWARE	
BELL CANYON	
CHERRY CANYON	
BRUSHY CANYON	
BONE SPRING	
GLORIETA	
BLINEBRY	
TUBB	
DRINKARD	
ABO	
WC	
PENN	
STRAWN	
ATOKA	
MORROW	
MISS	
DEVORTIAN	

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Submit 5 Copies
Appropriate District Office
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

State of New Mexico
Env Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Texaco Exploration and Production Inc.	Well API No. 30 025 21426 ✓
Address P. O. Box 730 Hobbs, New Mexico 88240-2528	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) EFFECTIVE 6-1-91	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
If change of operator give name and address of previous operator Texaco Producing Inc. P. O. Box 730 Hobbs, New Mexico 88240-2528	

II. DESCRIPTION OF WELL AND LEASE

Lease Name C H WEIR B	Well No. 7	Pool Name, Including Formation SKAGGS DRINKARD	Kind of Lease State, Federal or Fee FEE	Lease No. 880140
Location Unit Letter <u>J</u> : 1980 Feet From The <u>SOUTH</u> Line and <u>2307</u> Feet From The <u>EAST</u> Line Section <u>11</u> Township <u>20S</u> Range <u>37E</u> , NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> P&A	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> P&A	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

K. M. Miller

Signature K. M. Miller Div. Ops. Engr.

Printed Name May 7, 1991 Title 915-688-4834

Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 6 1991

By ORIGINAL SIGNED BY JERRY GEXTON
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

MAY 28 1967

HOW