

District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88241-1980
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131

New Mexico
Energy Minerals and Natural Resources Department
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

Form C-140
Revised 06/99

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

H-0648

1/12

I. Operator and Well

Operator name & address Texaco Exploration & Production Inc 500 N. Loraine Midland, TX 79702							OGRID Number 022351	
Contact Party Bobby J. Hill							Phone (505) 394-1855	
Property Name Weir, C.H., "A"					Well Number 15		API Number 30-025-28849	
UL H	Section 12	Township 20-S	Range 37-E	Feet From The 1980	North/South Line North	Feet From The 988	East/West Line East	County Lea

II. Workover

Date Workover Commenced: 7/13/00	Previous Producing Pool(s) (Prior to Workover): Weir Blinebry East
Date Workover Completed: 8/01/00	

- III. Attach a description of the Workover Procedures performed to increase production.
IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.
V. AFFIDAVIT:

State of N. M.)
County of Lea) ss.
Russell Pool- Denise Wann, being first duly sworn, upon oath states:
1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature Denise Wann Title Senior Engineer Hobbs Operating Unit Date 1-10-01
SUBSCRIBED AND SWORN TO before me this 10th day of January, 2001.
Notary Public John Ayers
My Commission expires: 2-29-04

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 8/1/2000.

Signature District Supervisor <u>Paul J. Kautz</u>	OCD District <u>1</u>	Date <u>1/19/2001</u>
---	--------------------------	--------------------------

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

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.	30-025-28849
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil / Gas Lease No.	879910
7. Lease Name or Unit Agreement Name	WEIR, C. H. -A-
8. Well No.	15
9. Pool Name or Wildcat	WEIR BLINEBRY EAST/SKAGGS DRNKRD
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3575' KB

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 PERMIT
(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	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>988</u> Feet From The <u>EAST</u> Line Section <u>12</u> Township <u>20S</u> Range <u>37E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3575' KB

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: ☒ DHC

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.

7-13-00: MIRU. PUMP STUCK. RU FOAM UNIT.
7-14-00: INSTL BOP. WRK STUCK TBG. PUMP 100 BBLs 2% DN BACKSIDE. WORK TBG LOOSE. SWAB TBG TO 4700'.
7-17-00: TIH W/CONE BUSTER MILL, DC'S ON WS. STOP BIT @ 5212'.
7-18-00: BREAK CIRC W/FOAM UNIT @ 5212'. TIH W/WS. TAG @ 5943'. PLUGGED TBG. LOWER TOOLS & TAG @ 5943'. C/O SCALE 5943-6093. PULL MILL TO 5441'.
7-19-00: LOWER TOOLS & TAG @ 6093'. MILL OUT TIGHT SPOT 6093-95. C/O SCALE 6095-6140. LOWER TOOLS & TAG @ 6495'. C/O TO CIBP @ 6593'. DRILL ON JUNK & CIBP. PULL MILL TO 5187'.
7-20-00: TIH W/BIT & DC'S ON TBG. TAG CIBP @ 6594'. DRILL 1 HR. PULL UP TO 5823'. LOWER TOOLS & TAG @ 6594'. DRILL ON CIBP & TURNED LOOSE. PUSH TO 6617'.
7-21-00: LOWER TOOLS & TAG @ 6877'. PULL TO 5472 W/FOAM UNIT. LOWER TOOLS & DRILL ON CIBP @ 6877'. PUSH TO 6893'. TIH W/SONIC HAMMER TOOL TO 2872'.
7-24-00: KILL W/40 BBLs 2% KCL WTR. TIH W/SONIC HAMMER & INSTL STRIPPER HEAD. ACID WASH BLINEBRY & DRINKARS PERFS 5726-5943', 6634-6873, W/3000 GALS 15% NEFE HCL & 240 BBLs 2% KCL WTR. RU SWAB. FL @ 4300'. END FL @ 5000'. RD SWAB.
7-25-00: RAN PROD STRING: MUD ANCHOR, PURGE VALVE, SN, TBG, TAC. MA @ 6869'. SN @ 6836'. TAC @ 5663'. NDBOP. SET TAC. FLANGE UP WH. RAN PUMP & RDS.
7-26-00: CHANGE OUT ALL RD BOXED.
7-27-00: LOAD/PSI TBG TO 500-OK. RIG DOWN.
8-15-00: ON 24 HR OPT. PUMPED 48 BO, 153 BW, & 92 MCF. PERFS: 5726-6873 BLINEBRY/DRINKARD
SPLITS: BLINEBRY OIL - 11, WTR - 38, MCF - 63
DRINKARD OIL - 37, WTR - 115, MCF - 29

ORDER #R-11363

FINAL REPORT

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant DATE 8/24/00

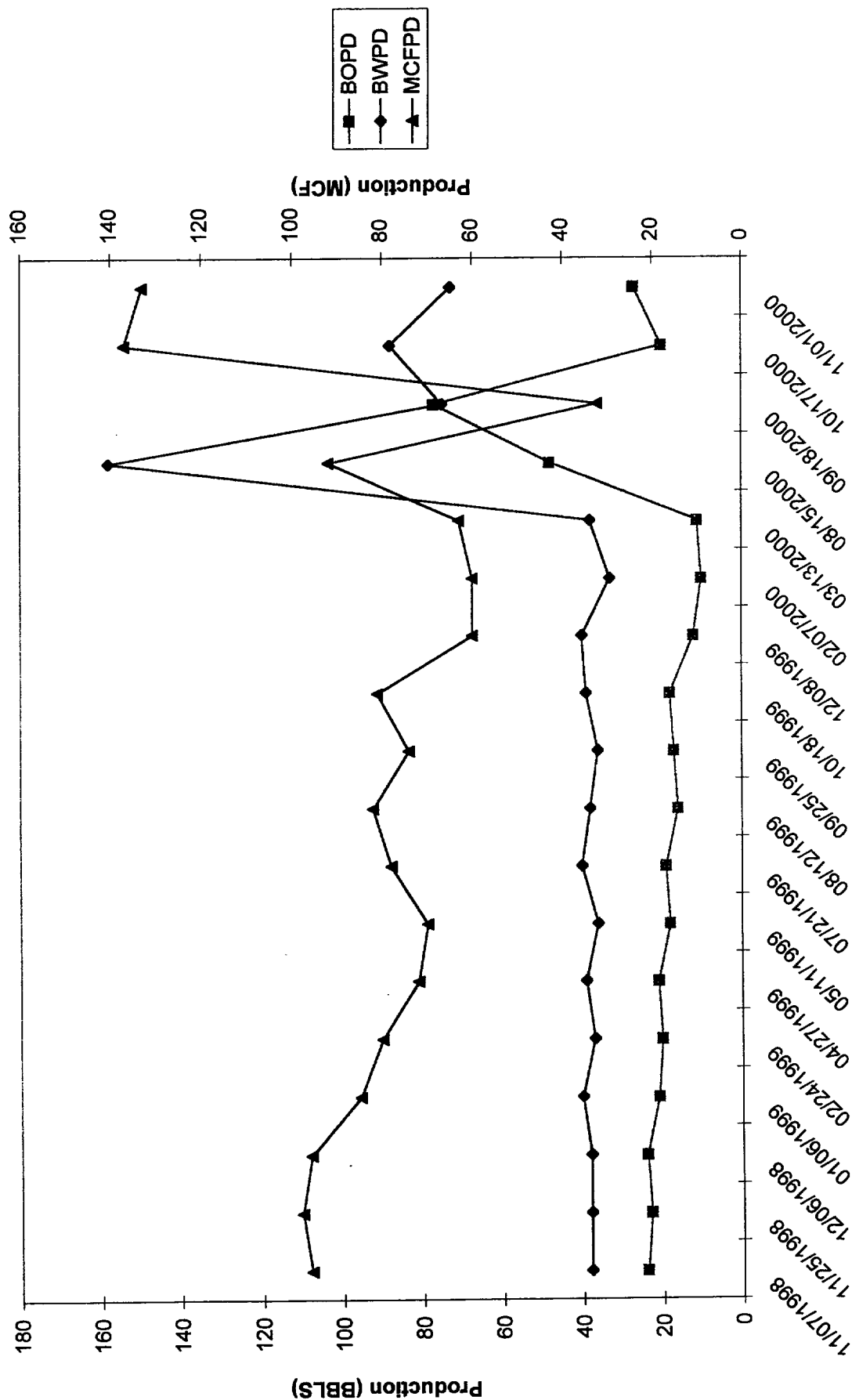
TYPE OR PRINT NAME J. Denise Leake Telephone No. 397-0405

(This space for State Use)

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

Chart1

CH Weir A #15



CHWEIRA15

ASSET_ID	START_DATE_TIM BOPD	BWPD	MCFPD
WEIRCH A 15	11/07/1998	24	38 96
WEIRCH A 15	11/25/1998	23	38 98
WEIRCH A 15	12/06/1998	24	38 96
WEIRCH A 15	01/06/1999	21	40 85
WEIRCH A 15	02/24/1999	20	37 80
WEIRCH A 15	04/27/1999	21	39 72
WEIRCH A 15	05/11/1999	18	36 70
WEIRCH A 15	07/21/1999	19	40 78
WEIRCH A 15	08/12/1999	16	38 82
WEIRCH A 15	09/25/1999	17	36 74
WEIRCH A 15	10/18/1999	18	39 81
WEIRCH A 15	12/08/1999	12	40 60
WEIRCH A 15	02/07/2000	10	33 60
WEIRCH A 15	03/13/2000	11	38 63
WEIRCH A 15	08/15/2000	48	158 92
WEIRCH A 15	09/18/2000	77	75 32
WEIRCH A 15	10/17/2000	20	88 137
WEIRCH A 15	11/01/2000	27	73 133