(June 1990) DEPARTMEN	TED STATES NT OF THE INTERIOR LAND MANAGEMENT	P.O. Bo	DII Cons. Division FORM APPROVED X 1980 Budget Bureau No. 1004-0135 NM 88241 _{Expires:} March 31, 1993
Do not use this form for proposals to	S AND REPORTS ON WELLS drill or to deepen or reentry to a different reso OR PERMIT " for such proposals	ervoir.	5. Lease Designation and Serial No. NM-86710 6. If Indian, Alottee or Tribe Name
SUBMI			7. If Unit or CA, Agreement Designation
1. Type of Well: OIL GAS WELL GAS	OTHER		8. Well Name and Number BILBREY 33 FEDERAL
2. Name of Operator TEXACO EXPLORA	TION & PRODUCTION INC.		1
3. Address and Telephone No. 205 E. Bender, HOE	BS, NM 88240 39	7-0405	9. API Well No. 30-025-30781
4. Location of Well (Footage, Sec., T., R., M., or Su Unit Letter C : 660 Feet From Th		rom The	10. Field and Pool, Exploaratory Area BILBREY ATOKA, NORTH (GAS)
WEST Line Section 33	Township 21S Range 32E		11. County or Parish, State LEA , NEW MEXICO
12. Check Appropriate	Box(s) To Indicate Nature of N	otice, Re	port, or Other Data
TYPE OF SUBMISSION		TY	PE OF ACTION
Notice of Intent	Abandonment Abandonment Recompletion Plugging Back 		 Change of Plans New Construction Non-Routine Fracturing
 Subsequent Report Final Abandonment Notice 	Casing Repair Atlering Casing	PLETE TO ATO	Water Shut-Off Conversion to Injection DKA Dispose Water
			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work,)*.

TEXACO INTENDS TO RECOMPLTE THE SUBJECT WELL TO THE ATOKA. THE CURRENT PRODUCTIVE INTERVAL WILL BE ISOLATED UNTIL PRESSURES PERMIT COMMINGLING ZONES. THE PROPOSED PROCEDURE IS AS FOLLOWS:

1. Set CIBP in tbg above the wireline entry guide at 13,931'. Recommend sinker bar trip prior to setting CIBP.

2. Blow down tbg pressure. Test CIBP to 1000 psig. Instl BOP.

3. Release from on/off tool @ 13,921' & poh to 13,638'.

- 4. Circ hle cln & spot acetic acid from 13,638' to 13,540'. poh.
- 5. TIH w/wireline entry guide, tbg sub, profile nipple, 10' tbg sub, retr pkr w/on/off tool.
- 6. PSA 13,510'. Rel from on/off tool.
- 7. Circ 10 PPG pkr fluid w/2% KCL.
- 8. Latch onto on/off tool & test pkr to 1000 psig.
 9. NDBOP & NUWH. Land tbg to permit stimulation dn tbg. Swab to 5200'.
- 10. Use guns to perf 4 JSPF, single phase the intervals 13,610-12' & 13,630'-13,638'.
- 11. Test well. Stimulate if necessary.

14. I hereby certify that the Thregoing is the SIGDATURE	J. Denise Leake	Engineering Assistant	DATE	8/17/98
APPROVED BORIG. SGI CONDITIONS OF APPROVAL, IF		PETROLEUM ENGINEEF	DATE	AUG 27 1998
	crime for any person knowingly and willfully to ma	ake to any department or agency of the United States any fals	se, fictitious or fraudule	ent statements or

DISTRICT

P.O. Box + J80, Hobbs, NM 88241-1980 DISTRICT II P.O. Box Drawer DD, Artesia, NM 88211-0719 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 DISTRICT IV P.O. Box 2088, Santa Fe, NM 87504-2088 State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Form C-102 Revised February 10,1994 Instructions on back Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies AMENDED REPORT

Santa Fe,	New Mexico	87504-2088

¹ API Number 30-025-30781	² Pool Code 72128 72125	³ Pool Name _، BILBREY ATOKA, BILBREY ATOKA
4 Property Code 010896	⁵ Property Name BILBREY 33 FEDE	
⁷ OGRID Number 022351	⁸ Operator Name TEXACO EXPLORATION & PR	2.010110

UI or lot no. Section Town	nship Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
C 33 21	S 32E		660	NORTH	1980	WEST	LEA

¹¹ Bottom Hole Location If Different From Surface

Ul or lot no.	Section	Township	Range	Lot.ldn	Feet From	The	North/South Line	Feet From The	East/West Line	County
12 Dedicated	Acres	¹³ Joint or Infill	14	Consolidatio	n Code	¹⁵ Orc	ier No.			
320		No								

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

				17 OPERATOR CERTIFICATION
16	. 🔺	1	E	I hereby certify that the information
		1	E	contained herein is true and complete to the
1940		1	E	best of my knowledge and belief
			E	
	l	1	E	
	 	 		J. Denise Geake
	1	1	E	Printed Name
	l I	l l	Ē	J. Denise Leake
	1	l i		Position
	1	l	F	Engineering Assistant
	1	1	F	Date
	ן ג א	3	E	8/17/98
				18 SURVEYOR CERTIFICATION
	1	, ,		I hereby certify that the well location shown
	1	l I		on this plat was plotted from field notes of
	1	1		actual surveys made by me or under my
	1			supervision, and that the same is true and
	I	1		correct to the best of my knowledge and
	1	1		belief.
				Date Surveyed
	1			Signature & Seal of
	1	• I		Professional Surveyor
	1			
	I	1		
	1			
	, 1 <u> </u>			Certificate No.
330 660 990 13	20 1650 1980 2310 26	40 2000 1500	1000 500 0	