

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Director
P.O. Box 1980
Hobbs, NM 88241

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT --" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address and Telephone No. 205 E. Bender, HOBBS, NM 88240 397-0405

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter F : 1980 Feet From The NORTH Line and 4981-1982 Feet From The
WEST Line Section 8 Township 22S Range 37E

5. Lease Designation and Serial No.
NMLC 033706A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
FALBY, C. P. -A- FEDERAL

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9. API Well No.
30 025 10118

10. Field and Pool, Exploratory Area
EUNICE SAN ANDRES

11. County or Parish, State
LEA, NEW MEXICO

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> OTHER: EUNICE SAN ANDRES
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

12-15-98: MIRU. UNSEAT PUMP. TOH W/RDS & PMP. NDWH. NUBOP. REL TAC. TOH W/200 JTS 2 3/8" TBG, TAC SN, PERF SUB & OPMA.
12-16-98: TIH W/BIT, CSG SCRAPER, & 2 3/8" TBG TO 6367'. TOH W/SAME. TIH W/CIBP, PKR & TBG. TEST TBG TO 6000 PSI. SET CIBP @ 6300'. PULL PKR TO 6288'. MIRU PUMP TRUCK. CIRC W/2% KCL & SPOT 16 BBLs 10# GEL BRINE FR 6300-5480'. SET PKR @ 6288'. TEST CIBP TO 500 PSI FOR 30 MIN FOR BLM-OK. REL PKR.
12-17-98: TOH W/TBG, PKR & SETTING TOOL. TIH W/CBL/GR LOG TOOL. LOG 5" CSG FR 6290-3400'. TOH W/LOG TOOL. TIH W/DUMP BAILER. CAP CIBP @ 6300' W/35' CMT. TIH W/CIBP & SET @ 5480'. SET PLUG. UNABLE TO GET OFF SET TOOL. WORK TO FREE. PULL ROPE SOCKET OFF SETTING TOOL. TEST CIBP @ 5480' TO 500 PSI FOR 30 MIN-OK. CHART FOR BLM.
12-18-98: RAN OVERSHOT W/GRAPPLE ON TBG. LATCH ONTO FSH @ 5471'. PERF 3820-4020'. RAN DUMP BAILER ON WIRELINE. SPOT 35' CMT ON CIBP @ 5480'. NEW PBTD @ 5445'. RAN PACKER. SN, & 120 JTS 2 3/8" TBG TO 3719'.
12-21-98: TIH W/2 3/8" TBG TP 4015'. SPOT 147 GALS ACID ACR PERFS 3820-4020'. PULL PKR TO 3723'. PSI CSG TO 500 PSI-OK. ACIDIZE PERFS 3820-4020' W/7900 GALS 15% NEFE HCL & 240 7/8" 1.3 SG, BS. FLSH W/20 BBLs. LIGHT BALL ACTION. RIG UP SWAB. FL @ 900'.
12-22-98: FLOW & TEST WELL TO FRAC TANK.
12-23-98: FLOW WELL TO TANK ON 32/64 CHOKE @ 210#. RU PUMP TRUCK. KILL WELL W/50 BBLs 10# BRINE. REL PKR & LOWER 5'. PSA 3728'. RESET PKR & NDBOP. NUWH. INSTL 3000# GATE VALVE & CHOKE. TEST CSG & WH TO 500# FOR 5 MIN-OK-NO CHART. LD RDS. LD 90 JTS 2 3/8" TBG. OPEN WELL TO FRAC TANK. FLOW 30 MIN-OK. HU TO FLOWLINE. RIG DOWN.
1-04-99: ON 24 HR OPT. FLOWING 6 BO, 421 BW, & 330 MCF. GOR-55,500. API GRAV-38@60. TP-200#.
FINAL REPORT

14. I hereby certify that the foregoing is true and correct

SIGNATURE J. Denise Leake TITLE Engineering Assistant

TYPE OR PRINT NAME J. Denise Leake

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

