

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NEW MEXICO 88240
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. P.O. Box 3109, Midland Texas 79702 688-4606

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter D : 660 Feet From The NORTH Line and 660 Feet From The
WEST Line Section 31 Township 23-S Range 32-E

5. Lease Designation and Serial No.
NM 18848

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
SDE '31' FEDERAL
1

9. API Well No.

10. Field and Pool, Exploratory Area
TRISTE DRAW WEST

11. County or Parish, State
LEA, NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☒ OTHER: AMEND TOTAL DEPTH
- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ 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.)*

TEXACO WOULD LIKE TO ADD 500' TO THE TOTAL DEPTH. THE NEW T.D. WILL BE 9200'. WE WILL BE TESTING THE BONE SPRING FORMATION IN THIS WELL.

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

SIGNATURE C. Wade Howard TITLE Eng. Assistant DATE 11/30/94

TYPE OR PRINT NAME C. Wade Howard

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE [Signature] DATE 12/29/94

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.