

District I - (505) 393-6161  
1625 N. French Dr  
Hobbs, NM 88241-1980  
District II - (505) 748-1283  
811 S. First  
Arltesia, 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-0663

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 SDE 31 Federal					Well Number 5		API Number 30-025-32717	
UL B	Section 31	Township 23-S	Range 32-E	Feet From The 810	North/South Line North	Feet From The 1980	East/West Line East	County Lea

II. Workover

Date Workover Commenced: 8/28/00	Previous Producing Pool(s) (Prior to Workover): Sand Dunes; Bone Springs; South
Date Workover Completed: 9/11/00	

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. )  
 ) ss.  
County of Lea )  
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 1-26-01

SUBSCRIBED AND SWORN TO before me this 26th day of January, 2001.

Notary Public John Ayer

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 9/11/00.

Signature District Supervisor <u>Paul J. Karty</u>	OCD District <u>1</u>	Date <u>2/15/01</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: \_\_\_\_\_

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

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 B : 810 Feet From The NORTH Line and 1980 Feet From The  
EAST 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

5

9. API Well No.  
30-025-32717

10. Field and Pool, Exploratory Area  
SAND DUNES, BONE SPRING, SOUTH

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: CLEAN OUT, ACIDIZE, SC SQ  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

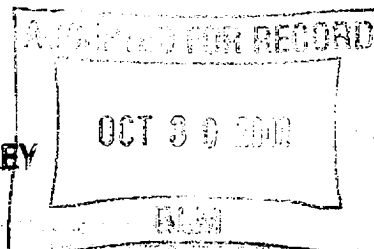
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

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.)\*

8-28-00: MIRU. PUMP STUCK. BACK OFF RDS W/BACKOFF TOOL. NDWH. NUBOP.  
8-29-00: TIH W/CSG SCRAPER ON TBG. TAG FILL @ 9258'. STOP BIT @ 2500'.  
8-30-00: TIH W/PKR, SN ON TBG. SET PKR @ 8923'. ACIDIZE CSG PERFS IN BONE SPRINGS FORMATION 9018-9084 W/2000 GALS 80/20 DAD ACID. REL PKR. PULL UP & SET @ 8548'. ACIDIZE BONE SPRINGS PERFS 8630-9044' W/2000 GALS 80/20 DAD ACID. REL PKR.  
8-31-00: TIH W/SMA W/PURGE VALVE, SN, TAC, TBG. SN @ 9086'. TAC @ 8565'. NDBOP & NUWH. TIH W/GAS ANCHOR, PUMP, RDS. HUNG ON. LOAD & TEST TBG TO 500#-OK. RIG DOWN. PUMPING @ 6:30 PM.  
9-06-00: UNSEAT PUMP. NDWH. NUBOP. TBG PIN PARTED @ 3326'.  
9-07-00: TIH W/OVERSHOT ON TBG. CATCH TBG COLLAR @ 3326'. REL TAC. TIH W/M, TBG, TAC ON TBG.  
9-08-00: TIH W/TBG. SET BTM OF TBG @ 9114'. SN @ 9088'. TAC @ 8549'. NDBOP. NUWH. TIH W/GAS ANCHOR, RDS. HUNG ON. LOAD & TEST TO 500#. GOING @ 7:00 PM.  
9-11-00: RIG DOWN.  
9-13-00: ON 24 HR OPT. PUMPED 20 BO, 28 BW, & 70 MCF. BONE SPRINGS PERFS 8630-9044.  
FINAL REPORT

ENTERED IN  
AFMSS

(ORIG. SGD.) GARY GOURLEY



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

SIGNATURE J. Denise Leake TITLE Engineering Assistant

DATE 10/11/00

TYPE OR PRINT NAME J. Denise Leake

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL IF ANY: TITLE DATE

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.

# BJHWELLTEST

ASSET_ID	START_DATE_TIM	BOPD	BWPD	MCFPD
SDE 31 FD 5 SDBS	09/18/1999	13	2	71
SDE 31 FD 5 SDBS	10/06/1999	11	0	70
SDE 31 FD 5 SDBS	02/11/2000	1	0	36
SDE 31 FD 5 SDBS	02/17/2000	1	0	36
SDE 31 FD 5 SDBS	03/08/2000	2	0	41
SDE 31 FD 5 SDBS	04/10/2000	8	2	105
SDE 31 FD 5 SDBS	04/30/2000	8	2	105
SDE 31 FD 5 SDBS	05/01/2000	8	2	105
SDE 31 FD 5 SDBS	09/17/2000	11	7	35
SDE 31 FD 5 SDBS	10/11/2000	7	7	70
SDE 31 FD 5 SDBS	11/13/2000	9	5	72
SDE 31 FD 5 SDBS	12/13/2000	7	1	70

Chart1

# SDE 31 Federal #5

