

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Co. Division
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. P.O. Box 3109, Midland Texas 79702 688-4606

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter L : 1980 Feet From The SOUTH 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
7

9. API Well No.

10. Field and Pool, Exploratory Area
TRISTE DRAW WEST & SAND DUNES SOUTHE BON

11. County or Parish, State
LEA, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input 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 checked="" type="checkbox"/> OTHER: <u>EXTEND DRILLING PERMIT</u>
	<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.)

DUE TO DRILLING PRIORITY, THIS WELL WILL NOT BE SPUDDED BEFORE THE FEBRUARY, 28, 1998 EXPIRATION DATE. PLEASE EXTEND THIS DRILLING PERMIT FOR AN ADDITIONAL ONE YEAR.

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

**APPROVED FOR 12 MONTH PERIOD
ENDING FEB 28 1999**

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

SIGNATURE A. Phil Ryan TITLE Commission Coordinator DATE 4/1/98

TYPE OR PRINT NAME A. Phil Ryan

(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.