

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30 025 24350
5. Indicate Type of Lease	STATE FEE
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	JAL WATER SYSTEM
8. Well No.	6
9. Pool Name or Wildcat	U.S.W. Capital LEA UNDESIGNATED GROUP-1

SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well:	OIL WELL GAS WELL OTHER WATER SUPPLY WELL
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	PO BOX 3109, MIDLAND, TEXAS 79701
4. Well Location	Unit Letter B : 1313 Feet From The NORTH Line and 1327 Feet From The EAST Line Section 4 Township 24S Range 36E NMPM LEA COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3420' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK
TEMPORARILY ABANDON
PULL OR ALTER CASING
OTHER:

PLUG AND ABANDON
CHANGE PLANS

SUBSEQUENT REPORT OF:

REMEDIAL WORK
COMMENCE DRILL OPERATIONS
CASING TEST AND CEMENT JOB
OTHER: Request extension of TA status ✓

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Subject: Jal Water System well #6

Texaco respectfully requests five year TA status for the subject well.

Justification: Texaco would like to hold this wellbore in TA status for future utility as a water supply well.

(Copy of the casing integrity test chart dated 8/6/01 attached)

This Application of Temporary
8/15/06

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE M. Quintana TITLE Engineering Assistant DATE 8/8/01
TYPE OR PRINT NAME Mike Quintana Telephone No. 505-394-9307

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

7056