

DISTRICT I
P.O. Box 1980, Hobbs, NM 88241-1980

DISTRICT II
P.O. Box Drawer DD, Artesia, NM 88211-0719

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV
P.O. Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-101
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies
☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address TEXACO EXPLORATION & PRODUCTION INC. 205 E. Bender, HOBBS, NM 88240		² OGRID Number 022351
⁴ Property Code 11060	⁵ Property Name SIMS, R. R. "A"	³ API Number 30 025 30483
		⁶ Well No. 1

⁷ Surface Location									
UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
N	4	23S	37E		330	S	2308	W	Lea

⁸ Proposed Bottom Hole Location If Different From Surface									
UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
⁹ Proposed Pool 1 Teague Devonian					¹⁰ Proposed Pool 2 <i>Northwest</i>				

¹¹ Work Type Code P	¹² WellType Code O	¹³ Rotary or C.T. Rotary	¹⁴ Lease Type Code P	¹⁵ Ground Level Elevation 3317' GR
¹⁶ Multiple No	¹⁷ Proposed Depth 10,254'	¹⁸ Formation Devonian	¹⁹ Contractor	²⁰ Spud Date 4/15/99

²¹ Proposed Casing and Cement Program

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
No Change					

²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone.
Describe the blowout prevention program, if any. Use additional sheets if necessary.

TEXACO INTENDS TO RECOMPLETE THIS TA'D WELL TO THE DEVONIAN FORMATION FROM 7466-7495'. THE INTENDED PROCEDURE IS AS FOLLOWS:

1. Move back Rotoflex Unit.
2. MIRU PU.
3. Instl BOP.
4. TIH w/2 7/8" tbg & spot 200 gals 15% NEFE HCL across interval to be perforated (7466-7495').
5. MIRU wireline services.
6. Perforate 7466-7470', 7477, 7483-7487', 7493-7495'.
7. TIH w/2 7/8" tbg & swab test to evaluate.
8. Run production eqpt & evaluate Devonian potential. OPT & place well back on production.

Permit Expires 1 Year From Approval
Date Unless ~~Drilling Underway~~
Plug Back

²³ I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature *J. Denise Leake*
Printed Name J. Denise Leake

Title Engineering Assistant

Date 3/29/99

Telephone 397-0405

OIL CONSERVATION DIVISION

Approved By: ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

Title:

Approval Date: 02 1999 Expiration Date:

Conditions of Approval:
Attached ☐

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State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-102

Revised February 10, 1994

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Fee Lease - 3 Copies

☐ AMENDED REPORT**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30 025 30483	² Pool Code 58365	³ Pool Name TEAGUE DEVONIAN, NORTHWEST
⁴ Property Code 11060	⁵ Property Name SIMS, R. R. "A"	⁶ Well No. 1
⁷ OGRID Number 022351	⁸ Operator Name TEXACO EXPLORATION & PRODUCTION INC.	⁹ Elevation 3317' GR

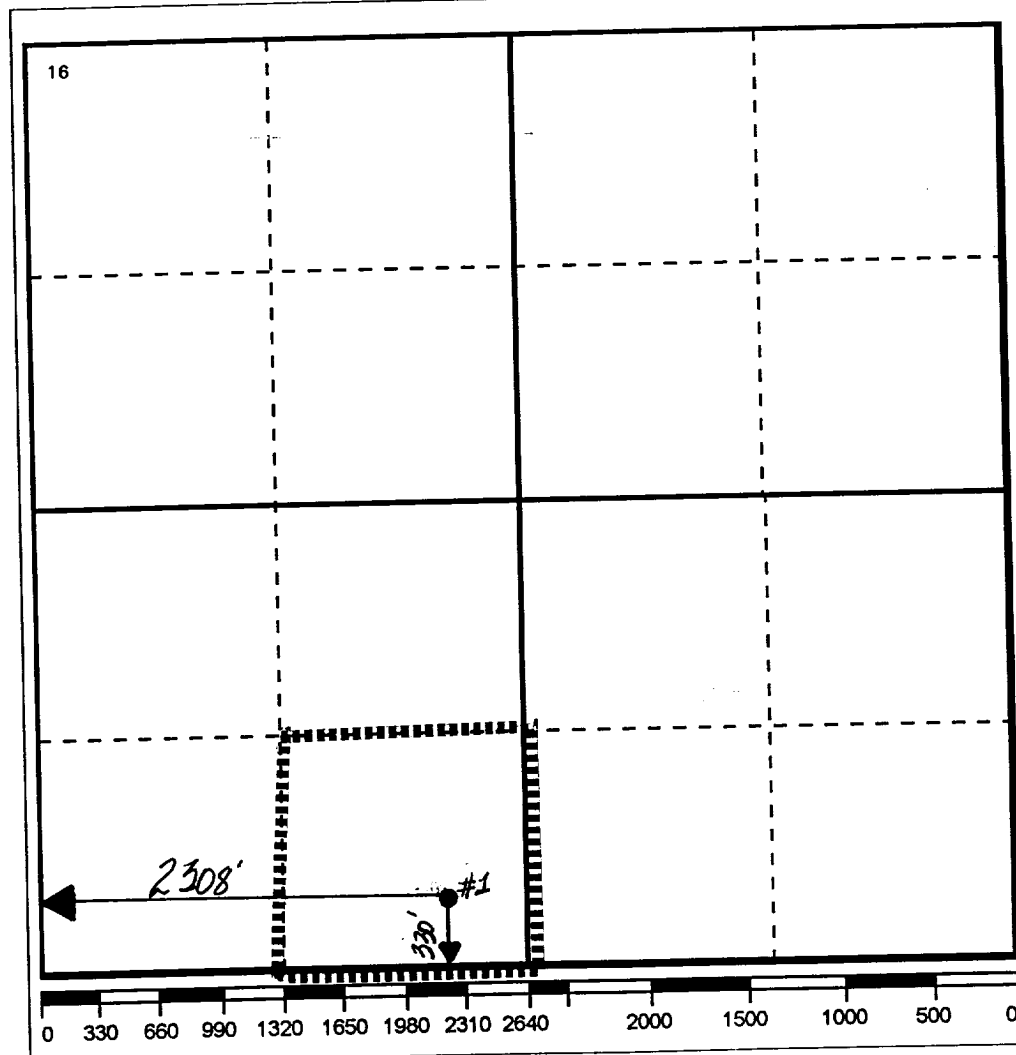
¹⁰ Surface Location

UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
N	4	23S	37E		330	S	2308	W	Lea

¹¹ Bottom Hole Location If Different From Surface

UI or lot no.	Section	Township	Range	Lot.Idn	Feet From The	North/South Line	Feet From The	East/West Line	County
¹² Dedicated Acres 40	¹³ Joint or Infill No	¹⁴ Consolidation Code	¹⁵ Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

**17 OPERATOR CERTIFICATION**

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

Signature

Printed Name

J. Denise Leake

Position

Engineering Assistant

Date

3/29/99

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Signature & Seal of
Professional Surveyor

Certificate No.