

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 32228
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	DAVIS, F. B.
8. Well No.	3
9. Pool Name or Wildcat	Lower Padilla North Teague Blinbry Assoc
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	GR-3321', KB-3325'

SUNDY 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 ☐

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

4. Well Location
Unit Letter H : 1880 Feet From The NORTH Line and 565 Feet From The EAST Line
Section 8 Township 23S Range 37E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT,GR, etc.) GR-3321', KB-3325'

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☒ perforated and fracture treat

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.

Objective: Texaco intends to add perforations to the current zone and then fracture stimulate.

1. MIRU. Installed BOP. TOH with production equipment.
2. TIH with RBP and set @ 5550'.
3. Perforate Blinbry with 4 jsfp on interval 5463'-5482' (80 holes).
4. Fracture stimulate new perforations with 62000 gallons 35# gel + 184000# 16/30 sand.
5. Flow well back. TIH with production equipment.
6. Return to production and test.
7. Test @ completion: Date 9-24-95 @ 26 BOPD. 43 BWPD. 370 MCFD.

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

SIGNATURE Paul R. Wilcox TITLE Field Technician DATE 2/27/96

TYPE OR PRINT NAME Paul R. Wilcox Telephone No. 397-0442

(This space for State Use) GERRY SEXTON

APPROVED BY GERRY SEXTON TITLE LEVISOR DATE FEB 29 1996

CONDITIONS OF APPROVAL, IF ANY:

