

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instruction  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-061936A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Texaco, Inc.		8. FARM OR LEASE NAME E. F. Ray (NCT-2)	
3. ADDRESS OF OPERATOR PO Box 728, Hobbs, New Mexico 33240		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  Unit Letter E, 1980' FNL, 660' FWL		10. FIELD AND POOL, OR WILDCAT Paduca Delaware	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T25S, R32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3471' KB, 10' AGL		12. COUNTY OR PARISH Lea	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

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

17. 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.)\*

1. Notify BLM (Hobbs #393-3612) prior to rigging up.
2. MIRU pulling unit. Install BOP.
3. Run free point survey, cut 4-1/2" casing above free point with jet cutter and pull casing. (Top of cement calculated at 3567'.)
4. TIH with tubing to PBTD. Load hole with salt gel mud (10 ppg brine with 25 lbs/bbl. gel).
5. Spot 35' (3 sx) plug of Class "H" cement (15.6 ppg, 1.18 cf/sk, 5.2 gal. wtr/sk) across top of CIBP. Tag plug.
6. Spot 200' (30 sx) plug of cement across 4-1/2" casing stub. Tag plug.
7. Spot 100' (21 sx) plug of cement across top of salt at ± 1142'.
8. Spot 200' (47 sx) plug of cement across 7-5/8" casing shoe. Tag plug.
9. Spot 50' (12 sx) plug of cement at surface.
10. Cut off wellhead. Install dry hole marker.
11. RD pulling unit. Clean location.

\*Verbally approved as per telephone conversation with Mr. Shannon Shaw (Carlsbad BLM) on 1/30/89.

18. I hereby certify that the foregoing is true and correct		397-3571
SIGNED <u><i>Ja Head</i></u>	TITLE Hobbs Area Superintendent	DATE 1/31/89
(This space for Federal or State office use)		
APPROVED BY <u>                    </u>	TITLE <u>                    </u>	DATE <u>2-9-89</u>
CONDITIONS OF APPROVAL, IF ANY: <u>                    </u>		

\*See Instructions on Reverse Side