

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88200

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 11419
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name State "L"	
8. Well No.	4
9. Pool Name or Wildcat	N JUSTIS BLINEBRY TUBB DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3185 DF

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.	
1. Type of Well:	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter <u>E</u> : <u>1655</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u> Line Section <u>2</u> Township <u>25S</u> Range <u>37E</u> NMPM <u>Lea</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3185 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 ☐

REMEDIAL WORK ☒

COMMENCE DRILLING OPERATION ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

ACIDIZE & PUT ON PRODUCTION ☒

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.

5-08-00: MIRU. UNSET PUMP. NDWH. NUBOP.

5-09-00: MADE SWAB RUN TO CHECK PARAFFIN IN TBG-OK. C/O TO 6192'. BTM PERF @ 6218'.

5-10-00: TIH W/SONIC HAMMER TOOL ON TBG. ACID WASH PERFS IN BLINEBRY/TUBB/DRINKARD FORMATION 5260-6190 W/211 BBLS 2% KCL WTR & 5000 GALS 15% NEFE HCL. SONIC HAMMER SCALE SQZ SAME INTERVALS W/165 GALS TH756 MIXED IN 130 BBLS 2% KCL WTR & FLSH W/100 BBLS 2% KCL.

5-11-00: TIH W/OPSMA, SN, TBG, TAC. MA @ 6152'. SN @ 6123'. TAC @ 5162'. NDBOP. SET TAVC. NUWH. TIH W/RDS. TIH W/GAS ANCHOR, PUMP. SNKR BARS.

5-12-00: TIH W/RDS. RAN PONY RDS. LOAD & TEST TO 500#-OK. PUMPING

5-15-00: RIG DOWN.

5-21-00: ON 24 HR OPT. PUMPING 38 BO, 17 BW, & 86 MCF. PERFS 5260-6218.

FINAL REPORT

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant

DATE 6/26/00

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL IF ANY

TITLE

DATE