Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED

BUREAU OF LAND MANAGEMENT	Budget Bureau No. 1004-0135 Expires: March 31, 1993
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reserve	5. Lease Designation and Serial No. NM-LC 057509
Use "APPLICATION FOR PERMIT" for such proposals	6. If Indian, Alottee or Tribe Name
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designat on
. Type of Well: OIL GAS OTHER	8. Well Name and Number ERWIN, G.L. 'B' FEDERAL NCT-2
P. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	9
. Address and Telephone No. 205 E. Bender, HOBBS, NM 88240 397-0	9. API Well No. 30-025-33384
J. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter P: 900 Feet From The SOUTH Line and 990 Feet From	10. Field and Pool, Exploaratory Area Justis The Justis Glorieta(Gas) Justis Blinebry Tubb-Drnkr
EAST Line Section 35 Township 24-S Range 37-E	11. County or Parish, State LEA , NEW MEXICO
 Check Appropriate Box(s) To Indicate Nature of Not 	ice, Report, or Other Data
TYPE OF SUBMISSION	TYPE OF ACTION
☐ Abandonment	☐ Change of Plans
Recompletion	☐ New Construction
☑ Notice of Intent ☐ Plugging Back	☐ Non-Routine Fracturing
Subsequent Report Casing Repair	☐ Water Shut-Off
Final Abandonment Notice	Conversion to Injection

13. 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,)*.

Texaco intends to DHC the Justis Glorieta (Pro Gas) and the Justis Blinebry-Tubb-Drinkard.

Application has been made to NMOCD in Santa Fe, NM for simultaneous dedication and DHC.

- 1. Perf Glorieta 4764-4780'.
- 2. Acidize & test.
- 3. DHC w/Justis Blinebry-Tubb-Drinkard Pools.

representations as to any matter within its jurisdiction.

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

SIGNATURE J. Denise Leake TYPE OR PRINT NAME J. Denise Leake		
111	DATE	4/6/99
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE	1 3 1999