

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIPT  
OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on reverse  
side)

OIL CONSERVATION COMMISSION  
Well District  
Modified Form No.  
P.O. BOX 19890-3180  
NEW MEXICO 88240  
DATE OF INFORMATION AND SERIAL NO.  
HOBBBS NM-14331

**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 EXPLORATION AND PRODUCTION INC.		8. FARM OR LEASE NAME BILBREY 30 FEDERAL	
3. ADDRESS OF OPERATOR P. O. Box 3109, Midland, TX 79702		3a. AREA CODE & PHONE NO. (915) 688-4620	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 660' FSL, 660' FWL, UNIT LETTER M.		10. FIELD AND POOL, OR WILDCAT LOST TANK DELAWARE	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC 30, T-21-S, R-32-E	
14. PERMIT NO. API NO. - 30-025-31712	15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR-3691'	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 ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) EXTEND DRILLING PERMIT ☒

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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.)\*

DUE TO DRILLING PRIORITY, THIS WELL WILL NOT BE SPUDDED BEFORE THE AUGUST 21, 1995 EXPIRATION DATE.  
PLEASE EXTEND THIS DRILLING PERMIT FOR AN ADDITIONAL YEAR.

APPROVED FOR 12 MONTH PERIOD  
ENDING 8/21/96

18. I hereby certify that the foregoing is true and correct

SIGNED C. Wade Hower TITLE ENGINEER'S ASSISTANT DATE 07-14-95

(This space for Federal or State office use)

APPROVED (ORIG SCD) JOE G. LARA TITLE PETROLEUM ENGINEER DATE 8/8/95  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side