

RECEIVED	
DISTRIBUTION	
DATE	
BY	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL "NOTICE OF INTENTION" COMMISSION

APPROVED BY \_\_\_\_\_  
 DATE \_\_\_\_\_

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT LIST THIS WELL AS A SEPARATE WELL UNLESS IT IS A DIFFERENT DESIGN OR USE THAN THE WELL TO WHICH IT IS BEING COMPARED FOR OPERATIONAL PURPOSES

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Well Approval No. _____
2. Name of Operator TEXACO Inc.	8. Name of Land Owner 141 State HWY-1
3. Address of Operator P.O. Box 728 Hobbs, New Mexico 88240	9. Well No. 11
4. Location of Well UNIT LETTER H 1650 FEET FROM ONE North 990 THE East LINE SECTION 6 TOWNSHIP 18-S RANGE 35-E	10. Well Name Vacuum Georgia
11. Elevation (Show whether DE, RT, GR, etc.) 3972	12. County Lee

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATIONS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER Casing String Identification <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

- Risers installed on all casing strings with valves above ground and labeled for future identification.
- Inspected by N.E. Clegg
- Casing Strings:
 

Size	Set At	No. sxs Cmt used
10 3/4"	1497'	800
2 7/8"	6247'	1200

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

SIGNED \_\_\_\_\_ TITLE Assistant District Supt. DATE 3-25-76

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: