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LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-1306-1

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name Vacuum Grayburg San Andres
2. Name of Operator Texaco Inc.	8. Farm or Lease Name Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 34
4. Location of Well UNIT LETTER J 2630 FEET FROM THE South LINE AND 2640 FEET FROM THE East LINE, SECTION 1 TOWNSHIP 18-S RANGE 34-E NMPM.	10. Field and Pool or Wildcat Vacuum Grayburg San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4010' (DF)	12. County Lea

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 OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Convert to Water Injection <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input 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 1103.

1. Rig up. Pull rods & pump. Check TD w/tubing.
2. Clean out to total depth if necessary.
3. Wash perms. 4334'-4792' w/500 gals. 15% NE Acid. Swab.
4. Pull tubing.
5. Run 2 3/8" OD plastic coated tubing w/Pkr. Set pkr. @ 4280'.
6. Load Annulus w/inhibited water.
7. Commence water injection.

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

SIGNED *Jerry Sexton* TITLE Asst. Dist. Mgr. DATE 4/3/81

APPROVED BY Jerry Sexton DATE 4/3/81
CONDITIONS OF APPROVAL, IF ANY: Dist. L. Sec.