

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-4119

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. Unit Agreement Name West Lovington Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name West Lovington Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 26
4. Location of Well UNIT LETTER L 660 FEET FROM THE West LINE AND 1980 FEET FROM THE North LINE, SECTION 3 TOWNSHIP 17-S RANGE 36-E NMPM.	10. Field and Pool, or Wildcat Lovington San Andres West
15. Elevation (Show whether DF, RT, GR, etc.) 3880' (GR)	12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON

TEMPORARILY ABANDON CHANGE PLANS

PULL OR ALTER CASING

OTHER Repair Water Flow

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING

COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT

CASING TEST AND CEMENT JOB

OTHER

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. Install BOP. Pull tubing & packer.
2. Set RBP @ 4450' & dump 2 Sx. Sand on plug.
3. Perforate 5 1/2" Csg W/2-JS @ 2061'.
4. Set cement retainer @ 2011'. Cement W/400 Sx. Class 'H' cement & circulate. Squeeze W/add'l. 200 Sx. Class 'H' cement. WOC. DOC. Test.
5. Install injection equipment. Test & return to injection.

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

SIGNED J. J. [Signature] TITLE Asst. Dist. Mgr. DATE 9-29-81

Orig. Signed by

APPROVED BY Jerry [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: