

1R - 128

**GENERAL
CORRESPONDENCE**

YEAR(S):

1995

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

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. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER

2. Name of Operator

Texas-New Mexico Pipeline Co.

3. Address of Operator

P.O. Box 60028 San Angelo, Texas

4. Well Location

Unit Letter _____ : _____ Feet From The _____ Line and _____ Feet From The _____ Line

Section 2 Township 22 S Range 37 E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. 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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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.

See attachment - 10 pages

AFFECTED SOIL WAS TESTED FOR TCLP METALS, BTEX & TPH Ignit.
Prior to Remedial work & Found to be Non-Hazardous.
The AFFECTED SOIL WAS Blended with soil in the Area & TPH Levels
Have been reduced to < 5000 ppm.
Ground water in the area ranges Between 114' to 155' in Depth
The maximum vertical Depth affected By the Release was 8'

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

SIGNATURE

John A. Savoie

TITLE

Senior Tech

DATE

2/26/95

TYPE OR PRINT NAME

John A. Savoie

TELEPHONE NO.

505-395-2705

(This space for State Use)

APPROVED BY

Larry Sexton

TITLE

DISTRICT I SUPERVISOR

MAR 04 1995

CONDITIONS OF APPROVAL, IF ANY: