Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO. 30-025-02255

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B-3011-1

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.)

7. Lease Name or Unit Agreement Name: Vacuum Grayburg San Andres Unit

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator: Texaco Producing Inc.

8. Well No. 26

3. Address of Operator: P.O. Box 730 Hobbs N.M.

9. Pool name or Wildcat: Vacuum Grayburg San Andres

4. Well Location
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line
Section 1 Township 18S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4003 DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[X]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			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. 6-11-90 thru 6-17-90

1. MIRV P.U. — TOH w/rods & pmp - NV BOP - TOH w/tbg
2. TIH w/Bulldog bailer - c/o to 4610 - TIH w/pkr set @ 4100'
3. Acidize OH - 4090 - 4610 w/ 1000 gal 15% NEFE & scl. sqz w/2 drums TH-783
   Max 1800, Min 1200, AIR 5 BPM, ISIP 1400, 15 min 1000
4. TOH w/pkr - TI w/Prod Equip & ret. to prod.

Test Prior 51 BO 182 BW Tçest After 58 BO 220 BW

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

SIGNATURE Richard DeSoto TITLE Engineering Technician DATE 7-28-90

TYPE OR PRINT NAME Richard DeSoto TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: