	•		
	7	?	
NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION	4		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSER	EVATION COMMISSION	Effective 1-1-65
FILE	4		
U.S.G.S.	-		5a. Indicate Type of Lease
LAND OFFICE	_		State K Fee
OPERATOR	_		5. State Oll & Gas Lease No.
			B-55035
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 PROPOBALS.)			
1.	OTHER•		7, Unit Agreement Name
2. Nume of Operated			None
TEXACO Inc.			B. Purm or Laune Hume
3. Address of Operator			New Mexico "R" State NO
•	Johns Nov. Morton 8821.0		9. Well No.
P. O. Box 728, Hobbs, New Mexico 88240			8
			10, Field and Pool, or Wildcat
UNIT LETTERA,	330 FEET FROM THE North	LINE AND 660 PEET PRON	Vacuum Glorieta
<b>.</b>			
THE East LINE, SECTI	18-S	RANGE 35-E NMPM	
mmmm			
	15, Elevation (Show whether DF)	· ·	12. County
	3984' (	(D. F.)	Lea
Check	Appropriate Box To Indicate Natu	ure of Notice, Report or Ot	her Data
NOTICE OF I	NTENTION TO:		T REPORT OF:
		33232	
PERFORM REMEDIAL WORK	PLUG AND AMANDON RE	EMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	c	OMMENCE DRILLING OPNS.	PLUG AND ASANDONMENT
PULL OR ALTER CASING	. —	ASING TEST AND CEMENT JOB	LEGG HAD VENUDUMENT
		OTHER	
OTHER			
<ol> <li>Describe Proposed or Completed Operator</li> <li>work) SEE RULE 1103.</li> </ol>	perations (Clearly state all pertinent details,	, and give pertinent dates, including	estimated date of starting any proposed
THE FOLLOWING WORK F	HAS BEEN COMPLETED ON SUBJE	CT WELL.	
The Toddoward Work I		NI WILLIE	
l. Pulled rods and	ກຸນຫາ		
2. Perforate 2 7/8'	od casing w/ 2 JSPF from	673/1 +0 67381 + 6792	1 +0 67961 + 62061
to 6210; and 62	201 to 62241.	01)4 00 01)0 , 01)2	00 019013 02001
3. Ran 1 $5/8$ " drill	pipe with packer and set	@ 61201	
4. Acidize perforat	zions 6134' to 6224' w/2000	l cole 28% MP acid	
5. Pull packer and	swah.	gars, 20% Nr acrus	·
6. Swab, run produc	ction equipment, test, and	return to production	
ami produc	' and dampinones occor and	rearm of broamcorous	
			-

18. I hereby certify that the information above is true and complet	te to the best of my knowledge and belief.	
SIGNED SIGNED	Assistant District	DATE December 11, 1968
CONDITIONS OF APPROVAL, IF ANY	TITLE	DATE