

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. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.	30 025 31129
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-1306
7. Lease Name or Unit Agreement Name	VACUUM GLORIETA WEST UNIT
8. Well No.	118
9. Pool Name or Wildcat	VACUUM GLORIETA

SUNDRY NOTICES AND REPORTS ON WELL (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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter <u>B</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>2135</u> Feet From The <u>EAST</u> Line Section <u>6</u> Township <u>18S</u> Range <u>35E</u> NMPM <u>Lea</u> COUNTY
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	KB-3983'

11. 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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

10-03-97: MIRU. TIH W/GAUGE RING & JB TO 5900'. TIH W/WIRELINE SET CMT RET @ 5863'.
 10-04-97: MIX & PUMP 100 SX CL H W/100 SX CL H NEAT CMT. PUMP DOWN TBG.
 10-05-97: WELL WENT ON VAC. SQZ W/200 SX CL H.
 10-06-97: TAG CMT RET @ 5863'. INSTL BOP & TEST TO 2000 PSI.
 10-16-97: TIH PU PIPE. TAG PLUG @ 5863'. TEST BOP TO 2000#. TIH W/WHIPSTOCK & MILL.
 10-17-97: MILL FR 5843-5860'.
 10-18 THRU 10-25-97: ROTATE DRILL
 10-26-97: UNLOAD 2 3/8" PROD TBG. TIH W/RETR TOOL. LATCH ONTO RBP @ 4997'.
 10-28-97 TIH W/MOTOR, SEAL, PUMP. NDBOP. NUWH. RDMO. WELL PUMPED UP @ 1:00 PM.
 10-31-97: TIH W/PKR & SET @ 5739'. LOAD & PSI CST TO 500#-OK.
 11-09-97: ACIDIZE 6000-7374' W/24,000 GALS 15% HCL & 476,000 SCF OF N2.
 11-10 THRU 11-11-97: SWABBING.
 11-12-97: TIH W/MOTOR, SEAL, PUMP. WELL PUMPED UP @ 3:30 PM. PUT ON TEST.
 11-17-97: ON 24 HR OPT. PUMPED 367 BO, 540 BW, & 140 MCF.
 FINAL REPORT

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant DATE 3/9/98
 TYPE OR PRINT NAME J. Denise Leake Telephone No. 397-0405

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS
 APPROVED BY CHRIS WILLIAMS DISTRICT I SUPERVISOR TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY: