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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 13

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

State of Lease
State New Mexico Fee

5. State Oil & Gas Lease No.
E-3289

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name None
2. Name of Operator TEXACO Inc.	8. Form or Lease Name New Mexico "CE" St. No.
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 2
4. Location of Well UNIT LETTER <u>F</u> <u>1685</u> FEET FROM THE <u>North</u> LINE AND <u>1652'</u> FEET FROM THE <u>West</u> LINE, SECTION <u>6</u> TOWNSHIP <u>19-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat Bumont
15. Elevation (Show whether DF, RT, GR, etc.) 3730' (12. County Ica

16. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER _____ <input type="checkbox"/>	OTHER <u>Shut Well In</u> <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

Subject well was shut in effective 7:00 A.M., 8-7-68.
It is recommended that this well be reclassified from its present producing status to TR-0, Held for Secondary Recovery.

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

SIGNED W.E. Morgan TITLE Assistant District Superintendent DATE August 13, 1968

APPROVED BY John W. Remyan TITLE Geologist DATE _____

CONDITIONS OF APPROVAL, IF ANY: