

NEW MEXICO OIL CONSERVATION COMMISSION

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. NM 2A
7. Unit Agreement Name
8. Farm or Lease Name State "A" A/c-2
9. Well No. 23
10. Field and Pool, or Wildcat South Eunice
12. County Lea

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection
2. Name of Operator TEXAS PACIFIC OIL CO., INC.
3. Address of Operator P.O. Box 1069-Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER H , 1980 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 8 TOWNSHIP 22-S RANGE 36-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3573' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Convert to Water Injector <input checked="" type="checkbox"/>

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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.

1. Move in, rig up. Pull rods, pump and tubing.
2. Run 2-3/8" plastic coated tubing on Baker Model AD packer. Set @ 3675'.
3. Displace annulus w/treated water and set packer.
4. Connect wellhead to commence water injection.

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

Original Signed by

SIGNED **Sheldon Ward**

TITLE **Area Superintendent**

DATE **7-23-70**

APPROVED BY

TITLE **SUPERVISOR**

DATE **JUL 27 1970**

CONDITIONS OF APPROVAL, IF ANY: