NO. OF COPIES RECEIVED	Form C-103
SANTA FE / NEW MEXICO OIL CONSERVATION COMMISSION	Supersedes Old C-102 and C-103 Effective 1-1-65
U.S.G.S. LAND OFFICE	5a. Indicate Type of Lease
OPERATOR 2	State A Fee 5. State Oil & Gas Lease No.
CHAIDDAYAGE	E5316, E3149
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 OTHER- 2. Name of Operator	7. Unit Agreement Name
TEXACO Inc.	8. Farm or Lease Name
3. Address of Operator	New Mexico Com 9. Well No.
P. O. Box 810, Farmington, New Mexico 87401	1
UNIT LETTER A . 890 FEET FROM THE NORTH LINE AND 990 FEET FROM	10. Field and Pool, or Wildcat Blanco-Mesa Verde
THE East LINE, SECTION 36 TOWNSHIP 30N RANGE 10W NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
5883' DF	San Juan
Check Appropriate Box To Indicate Nature of Notice, Report or Oth NOTICE OF INTENTION TO: SUBSEQUENT	her Data r report of:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
CHANGE PLANS CASING TEST AND CEMENT JOB	
OTHER	
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including work) SEE RULE 1103.	estimated date of starting and process
Reason for workover was to increase production. Commenced workover on 6-1-66. Killed well and pulled tutubing with packer and retrievable bridge plug and treat 4705' to 4886' with 1,000 gallons of mud acid. Treating 0 psi with an average injection rate of four barrels per perforations 4053' to 4146' with 750 gallons of mud acid 500 to 0 psi with an average injection rate of 4.5 barre Pulled packer and bridge plug, reran tubing and swabbed. ending 7-11-66, well tested at the rate of 212 MCF per d tubing pressure of 510 psi and flowing casing pressure o into sales line, sales line pressure was 504 psi.	ed perforations pressure 900 to minute. Treated Treating pressure ls per minute. On 24 hour test
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.	Uisir
HIGHED LUGAL HERENE TITLE DISTRICT Accountant	DATE 7/22/66

SUPERVISOR DIST. #3

AUG - 1 1966

APPROVED BY

Original Signed by Emery C. Arnold