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NEW MEXICO OIL CONSERVATION COMMISSION

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

SUNDY NOTICES AND REPORTS ON WELLS <small>DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)</small>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. State Oil & Gas Lease No.
2. Name of Operator TEXACO INC.		7. Unit Agreement Name
3. Address of Operator P.O. Box 723, Hobbs, New Mexico 88240		8. Farm or Lease Name U. D. Sawyer
4. Location of Well UNIT LETTER I 2310 FEET FROM THE South LINE AND 990 FEET FROM THE East LINE, SECTION 34 TOWNSHIP 9-S RANGE 36-E NMPM.		9. Well No. 3
15. Elevation (Show whether DF, RT, GR, etc.) 4030' DF		10. Field and Pool, or Wildcat Crossroads Devonian
12. County Lea		

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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. Set RTTS Packer in 5 1/2" casing @ 11,539'.
2. Squeezed perforations 11,730-779' w/50 sx Class 'C' cement.
3. Drilled out cement & tested perforations 11,730-779' w/2000# for 30 minutes. Tested okay. Cleaned out open hole to 12,195'.
4. Drilled 4 5/8" hole to 12,680'.
5. Acidized open hole 12,182 - 12,680 w/6000 gals. regular 20% acid.
6. Ran 10,250' 3 1/2" tubing w/packer set in 5 1/2" casing @ 10,250'.
7. Converted to SMD 5-5-73.

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

SIGNED *[Signature]*

TITLE **Asst. District Superintendent** DATE **5-24-73**

APPROVED BY *[Signature]*

TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: