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# NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
State - B-10278

## 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
2. Name of Operator	NONE
3. Address of Operator	8. Farm or Lease Name
TEXACO Inc.	New Mexico "BH" State
4. Location of Well	9. Well No.
UNIT LETTER C 660 FEET FROM THE North LINE AND 1989 FEET FROM	1
THE West LINE, SECTION 11 TOWNSHIP 12-S RANGE 32-E NMPM.	10. Field and Pool, or Wildcat
	East Caprock (Devonian)
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	Lea

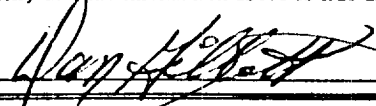
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER Shut Well In <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 1703.

We will shut subject well in effective 7:00 A. M. November 1, 1967. A study will be made into the possibility of re-completing the well in another pay.

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

SIGNED	TITLE	DATE
	Assistant District Superintendent	October 5, 1967
APPROVED BY	ENGINEER	DATE
CONDITIONS OF APPROVAL, IF ANY:		