NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION	HOLD OF FULL, C.	Supersedes Old C-102 and C-103
SANTA FL	1	Effective 1-1-65
U.S.G.S.	Jul 15 3 22 PM 168	5a. Indicate Type of Lease
LAND OFFICE		State X Foe
OPERATOR		5, State OIL & Gan Leane No. E-9835
SUNDRY NOTICES AND REPORTS ON WELLS		munimum.
OUNDET USE **APPLICAT USE **APPLICAT	OPOSALS TO BRILL OR TO DEFEN OR PLUG BACK TO A DIFFERENT RESERVOIR. JON FOR PERMIT - ' (FORM C-101) FOR SUCH PROPOSALS.)	
I. OIL Y GAS		7. Unit Agreement Name
2, Name of Operator	OTHER-	None 8. Farm or Lease Name
TEXACO Inc.		New Mexico "CQ" State
3. Address of Operator	20-1	9. Well No.
P. O. Box 728, H	lobbs, New Mexico 88240	2
4. Location of Well	7,000	Inbe (Pennsylvanian)
UNIT LETTER	660 FEET FROM THE West LINE AND 1980 FEET FAC	Tube (Leurs) TAMETAN
South	ON 35 TOWNSHIP 10-S RANGE 33-E NMPI	
THE LINE, SECTION		
	15. E. evation (Show whether DF, RT, GR, etc.)	12. County Lea
	1201; (D. F.)	
Check ,	Appropriate Box To Indicate Nature of Notice, Report or O	ther Data
NOTICE OF IN	NTENTION TO: SUBSEQUEN	TREFORT OF.
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JQB	
OTHER	OTHER	
17. Describe Proposed or Completed Opwork) SEE RULE 1103.	perations (Clearly state all pertinent details, and give pertinent dates, includir	ng estimated date of starting any proposed
The following work	has been completed on subject well:	
1. Pulled Rods and pump. 2. Acidize perforations 9650' - 9742' w/ 1000 gals 28% NE acid.		
3. Over-flushed w/1000 gals fresh water.		
4. Swab, Test, and return to production.		
	•	
18. I hereby cerrify that the information	Assistant District	
	Superintendent	July 15, 1968
SIGNED // // //	TITLE Super Internation	DATE
	deologist	1 6 196p
APPROVED BY MINICU	Uniferral title	OATE
CONDITIONS OF APPROVAL, IF ANY	$oldsymbol{\sigma} = \mathcal{G}$	