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NEW MEXICO OIL CORPORATION

X

B-1258-1

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN WELLS OR TO OPERATE WELLS UNLESS YOU HAVE FIRST OBTAINED A PERMIT TO DRILL OR TO OPERATE WELLS FROM THE STATE ENGINEER.

<input checked="" type="checkbox"/> GAS WELL	<input type="checkbox"/> OTHER
Name of Operator TEXACO INC.	
Address of Operator P. O. Box 728 - Hobbs, New Mexico 88240	
Location of Well UNIT LETTER B 990 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 11 TOWNSHIP 18-S RANGE 34-E	
15. Elevation (Show whether <i>DF, RT, GR, or I</i>) 4013' (DF)	

N.M. 'AE' State

14

Vacuum Abo Reef

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT ON:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	RE-OPEN WELLS <input type="checkbox"/>	REPAIR WELLS <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	IMPROVE QUALITY OF WORK <input type="checkbox"/>	RE-ASSIGNMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND COLLECTION <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details of work) SEE RULE 1103.

1. Set CIBP at 7700' and spot 35' (1 sx) cement plug on top.
2. Load hole with mud (25 sx gel per 100 bbls water).
3. Run freepoint, cut 2-3/8" casing and pull.
4. Spot 100' (35 sx) cement plug across casing stub, 50' above and 50' below.
5. If casing is cut and pulled below 3350', spot 100' (35 sx) cement plug across intermediate casing shoe.
6. Spot 20' (3 sx) cement plug at surface.
7. Clean location and install marker.

100' plug in 8 5/8" at top salt

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

SIGNED: *[Signature]* Assistant District Superintendent 8-18-75

APPROVED BY: *[Signature]*

CONDITIONS OF APPROVAL, IF ANY: