

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-70

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-155-1

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.)

OIL WELL GAS WELL OTHER-

Name of Operator
TEXACO, Inc.

Address of Operator
P. O. Box 728, Hobbs, New Mexico 88240

Location of Well
UNIT LETTER E 467 FEET FROM THE West LINE AND 1980 FEET FROM

THE North LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMPM.

7. Unit Agreement Name
-

8. Farm or Lease Name
N.M. 'O' St. NCT-1

9. Well No.
20

10. Field and Pool, or Wildcat
Vacuum Glorieta

15. Elevation (Show whether DF, RT, GR, etc.)
4016' (DF)

12. County
Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

INFORM REMEDIAL WORK
TEMPORARILY ABANDON
PULL OR ALTER CASING
OTHER ADDL PERFS IN GLORIETA

PLUG AND ABANDON
CHANGE PLANS

REMEDIAL WORK
COMMENCE DRILLING OPNS.
CASING TEST AND CEMENT JOB
OTHER

ALTERING CASING
PLUG AND ABANDONMENT

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.

- RIG UP. PULL RODS AND PUMP. INSTALL BOP.
- LOG WELL.
- PERFORATE 2 7/8" OD CASING W/1-JSPF @ 5952, 53, 54, 79, 87, 89, 6015, 17, 18, 50, 52, 63, 64, 69, 84, 91, 92, 95, 6102, 09, 14, 16, 30, & 6131'.
- SET RBP @ 6160' AND PKR @ 6035'. ACIDIZE PERFS 6050-6131' W/3000 GALS 15% NEFE ACID IN 3-STAGES USING 50# ROCK SALT BETWEEN STAGES. FLUSH W/300 GAL 2% KCL WATER.
- RESET RBP @ 6035' AND PKR @ 5860'. ACIDIZE PERFS 59-52-6018' W/2500 GALS 15% NEFE ACID IN 4-STAGES USING 100# ROCK SALT BETWEEN STAGES. FLUSH W/295 GALS 2% KCL WATER. PULL RBP & PACKER.
- INSTALL PUMPING EQUIPMENT. TEST AND RETURN TO PRODUCTION.

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

PREPARED BY R. Frank Gray
Eddie W. Smith
Oil & Gas Inspector

TITLE District Operations Manager DATE 12-11-84

TITLE _____ DATE _____

DEC 12 1984

CONDITIONS OF APPROVAL, IF ANY: