

CONFIDENTIAL

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

NEW MEXICO OIL CONSERVATION COMMISSION

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U.S.G.S.	
LAND OFFICE	
OPERATOR	1

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
K 5005

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 <input type="checkbox"/> WELL GAS <input type="checkbox"/> WELL OTHER- Wildcat	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.,	8. Farm or Lease Name New Mexico NB
3. Address of Operator Box 810, Farmington, New Mexico 87401	9. Well No. 1
4. Location of Well UNIT LETTER K 2310 FEET FROM THE South LINE AND 2310 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 17N RANGE 9W NMPM.	10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 6940' GR	12. County McKinley

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <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 1103.

Spudded 5:00 AM, 7-10-66.

Drilled 11" hole to 37' and cemented 32' of 7-5/8" casing at 37' with 11 sacks of regular cement. Cement circulated. Tested casing with 800 psi for 30 minutes. Casing tested okay.



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

SIGNED Emery C. Arnold TITLE District Superintendent DATE 8/26/66

Original Signed by Emery C. Arnold APPROVED BY _____ TITLE SUPERVISOR DIST. #3 DATE OCT 25 1966

CONDITIONS OF APPROVAL, IF ANY: