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LAND OFFICE		
OPERATOR		

# 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. B-2422
7. Unit Agreement Name Eunice Monument Unit
8. Farm or Lease Name Eunice Monument Unit
9. Well No. 37
10. Field and Pool, or Wildcat Eunice Monument (G-SA)
12. County Lea

## 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"/>
2. Name of Operator TEXACO INC.
3. Address of Operator P.O. BOX 728, HOBBS, NEW MEXICO 88240
4. Location of Well UNIT LETTER A, 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 30 TOWNSHIP 20S RANGE 37E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3532' DF

16.

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 checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input 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.

### REMARKS

1. WELL STATUS - Shut In -Oil
2. TEMPORARY ABANDONMENT DATE - March, 1970
3. REASON FOR ABANDONMENT - Waiting on Waterflood Response.
4. FUTURE PLANS - Pumping Unit will be installed when well responds to Waterflooding.
5. DATE OF FUTURE WORKOVER OR PLUGGING - January, 1975

Expires 10/1/75

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

SIGNED 	TITLE Asst. Dist. Supt.	DATE 10-21-74
APPROVED BY	DATE OCT 24 1974	
CONDITIONS OF APPROVAL, IF ANY: Dist. I, Supv.		