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# NEW MEXICO OIL CONSERVATION COMMISSION

**MAR 13 1970**  
Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

## 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"/>	5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
2. Name of Operator <b>TEXACO Inc.</b>	5. State Oil & Gas Lease No.
3. Address of Operator <b>P. O. Box 728 - Hobbs, New Mexico 88240</b>	7. Unit Agreement Name
4. Location of Well UNIT LETTER <b>K</b> <b>1980</b> FEET FROM THE <b>South</b> LINE AND <b>2310</b> FEET FROM THE <b>West</b> LINE, SECTION <b>12</b> TOWNSHIP <b>20-S</b> RANGE <b>37-E</b> NMPM.	8. Farm or Lease Name <b>C. H. Weir "A"</b>
	9. Well No. <b>9</b>
	10. Field and Pool, or Wildcat <b>Skaggs Glorieta</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3561 (DF)</b>	12. County <b>Lea</b>

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

#### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

#### SUBSEQUENT REPORT OF:

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

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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.

The following work has been completed on subject well:

1. Pull rods and pump.
2. Spot 3 drums of United Techniclean #405 mixed w/ 3 drums water on perforations.
3. Acidize w/500 gals 5% NEA.
4. Squeeze perforations 5293' to 5303' w/mixture of 2 drums United 763 mixed w/25 bbls water. Overflush w/150 bbls water.
5. Run pump and rods, test and return to production.

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

SIGNED [Signature] TITLE **Assistant District Superintendent** DATE **March 13, 1970**  
APPROVED BY [Signature] TITLE **SUPERVISOR OF MINING** DATE **MAR 16 1970**  
CONDITIONS OF APPROVAL, IF ANY: