State of New Mexico Form C-103 Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-31836 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III FEE D Santa Fe, NM 87505 STATE 🔀 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 B-1520-1 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) Vacuum Glorieta West Unit 1. Type of Well: Oil Well Gas Well Other Water Injection 2. Name of Operator 8. Well No. Texaco Exploration & Production 3. Address of Operator 9. Pool name or Wildcat 500 N. Loraine Midland, Texas Vacuum Glorieta 4. Well Location 100 2628 South Unit Letter feet from the line and feet from the West line Section **Township NMPM** Range County **Tea** 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4001' GR 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK \mathbf{x} ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT CASING TEST AND PULL OR ALTER CASING** MULTIPLE **CEMENT JOB** COMPLETION OTHER: Failure OTHER: \mathbf{x} 12. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. 06-18-03 MIRU. 06-19-03 Rel pkr. TOH w/191 jts tbg & pkr. TIH w/pkr & duo-line tbg. Displaced hole w/135 bbls brine pkr fluid. Set pkr @ 5974.18'. 06-20-03 06-21-03 Test csg to 500 psi (good). FINAL REPORT. Original Chart w/copy attached. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE. TITIE Regulatory Specialist <u>06-26-03</u> Type or print name Laura Skinner Telephone No. 432-687-7355 (This space for State use) 0 1 2003 EED REPRESENTATIVE II/STAFF MAN APPROVED BY -Conditions of approval, if any:

