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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-9639
7. Unit Agreement Name
8. Farm or Lease Name New Mexico "B0" State
9. Well No. 2
10. Field and Pool, or Wildcat Moore Devonian
12. County Lea

SUNDY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT TO DRILL" (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 1980 FEET FROM THE North LINE AND 660 FEET FROM
THE West LINE, SECTION 24 TOWNSHIP 11-S RANGE 32-E NMPM.

15. Elevation (Show whether DF, RT, CR, etc.)
4341' (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 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:

- Well Status - TR-0 (To Be Reconditioned-Oil)
- Temporary Abandonment Date - April, 1976
- Reason for Abandonment - Capacity limitations of salt water disposal system
- Future Plans - The well will be returned to production when capacity of SWD system is increased.
- Date to be Returned to Production - Second Quarter, 1977

Expend 5/1/77 (4')

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

SIGNED [Signature] TITLE Asst. Dist. Supt. DATE February 15, 1977

Orig. Signed by
Larry Sexton
Dist. 1. Supv.

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

FEB 1 1977