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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 type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
Fee	

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. <div>CIL WELL <input type="checkbox"/></div> <div>GAS WELL <input type="checkbox"/></div> OTHER- <b>Water Injection</b>	
2. Name of Operator <b>TEXACO Inc.</b>	
3. Address of Operator <b>P.O. Box 728, Hobbs, New Mexico 88240</b>	
4. Location of Well: UNIT LETTER <b>P</b> <b>660</b> FEET FROM THE <b>South</b> LINE AND <b>660</b> FEET FROM THE <b>East</b> LINE, SECTION <b>15</b> TOWNSHIP <b>12-S</b> RANGE <b>32-E</b> NMPM.	

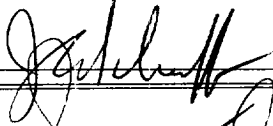
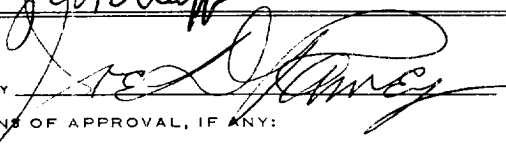
7. Unit Agreement Name <b>Northeast Caprock Queen Unit</b>
8. Farm or Lease Name <b>Northeast Caprock Queen Unit</b>
9. Well No. <b>12</b>
10. Field and Pool, or Wildcat <b>Caprock Queen</b>
12. County <b>Lea</b>

15. Elevation (Show whether DF, RT, GR, etc.) <b>4350' (DF)</b>
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16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
<div>PERFORM REMEDIAL WORK <input type="checkbox"/></div> <div>TEMPORARILY ABANDON <input type="checkbox"/></div> <div>PULL OR ALTER CASING <input type="checkbox"/></div> <div>OTHER <input type="checkbox"/></div>	<div>PLUG AND ABANDON <input type="checkbox"/></div> <div>CHANGE PLANS <input type="checkbox"/></div> <div>OTHER <input type="checkbox"/></div>
<div>REMEDIAL WORK <input type="checkbox"/></div> <div>COMMENCE DRILLING OPNS. <input type="checkbox"/></div> <div>CASING TEST AND CEMENT JOB <input type="checkbox"/></div> <div>OTHER <input type="checkbox"/></div>	<div>ALTERING CASING <input type="checkbox"/></div> <div>PLUG AND ABANDONMENT <input type="checkbox"/></div> <div>Shut well in <input checked="" type="checkbox"/></div>

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.

Subject well shut-in effective 7:00 AM, August 26, 1970. It is requested that the well be reclassified from its present status to ASD (Abandoned - Salvage Deferred) - Held for abandonment of unit.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED 	TITLE <b>Assistant District Superintendent</b>	DATE <b>August 26, 1970.</b>
APPROVED BY 	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		