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NEW MEXICO OIL CONSERVATION COMMISSION

AUG 31 2 53 PM '65

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name NONE
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name U. D. Sawyer
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico	9. Well No. 3
4. Location of Well UNIT LETTER I 2310 South 990 THE East LINE, SECTION 34 TOWNSHIP 9-S RANGE 36-E NMPM.	10. Field and Pool, or Wildcat Crossroads Devonian
15. Elevation (Show whether DF, RT, GR, etc.) 4030' (D. F.)	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input checked="" type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>
OTHER	<input type="checkbox"/>
ALTERING CASING	<input type="checkbox"/>
PLUG AND ABANDONMENT	<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.

We propose to do the following work on subject well:

1. Pull tubing and pump equipment.
2. Run tubing with hookwall packer, spot acid in the open hole, 12,164' to 12,172', set packer and acidize formation with 1000 gals 15% regular acid.
3. Swab well, test, and if necessary re-acidize with 2500 gallons 15% retarded acid.
4. Pull tubing and packer, re-run tubing with Kobe Pump Installation, and Test well, return well to production.

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

SIGNED J. E. Jordan TITLE Field Foreman DATE August 31, 1965

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: