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NO. OF COPIES RECEIVED	•	Form C-103
DISTRIBUTION		Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State Fee X
OPERATOR		5, State Oil & Gas Lease No.
		-
SUNDRY N	IOTICES AND DEPORTS ON WELLS	
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.	OR PERMIT - (FORW C-101) FOR SOCH PROPOSALS.)	7. Unit Agreement Name
OIL T GAS	OTHER-	
2. Name of Operator		8. Farm or Lease Name
TEXACO Inc.		F. B. Gist
2. Address of Operator		9. Well No.
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico 88240		2
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER H 2080 FEET FROM THE NORTH LINE AND 660 FEET FRO		Bagley Penn, North
THE East LINE, SECTION 31 TOWNSHIP 11-S RANGE 33-I' NMP		MPM. Allillillillillilli
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4316' (DF)	Lea
16. Cl 1. Ann	Den Te Jeliene Name of Marie Denom of	Oshan Dana
	propriate Box To Indicate Nature of Notice, Report or	
NOTICE OF INTE	.NITON TO: SUBSEQU	JENT REPORT OF:
[]		1
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JQB	!
	OTHER	
OTHER		
		1
 Describe Proposed or Completed Operat work) SEE RULE 1103. 	tions (Clearly state all pertinent details, and give pertinent dates, incli	uaing estimated date of starting any proposed
,		
The following work on	subject well has been completed.	
1. Pulled hydraulic	pumping equipment.	
2. Perforated the following intervals w/2 JSPF 9031', 9082', 9163', 9165', 9457',		
	3', 9519', 9521', 9655'- 9657', 9827' - 98	
0055! - 0056! 10	035' - 10,036'. Total 24 shot intervals.	
2 Acidized perforet	ions 9031' to 10,036' with 12,000 gals 15%	inisol w/205#
	ages of 1,000 gal each w/uniteads between	
	and RTTS tool at 9000'.	a vage a .
	and hils coor at 9000.	
5. Swab		
6. Pulled RTTS and R		
7. Set hydraulic pum	-	
8. Return to product	ion. Clean location.	
; ;		
18. I hereby certify that the information about	ove is true and complete to the best of my knowledge and belief.	
\sim 1 \parallel \parallel	Assistant District	
$(\mathcal{M}, \mathcal{M}, M$	Superintendent	DATE October 5, 1970
SIGNED WILLIAM	TITLE	
	0	
Vale and	Russia	1000
APPROVED BY	Mayan TITLE " or Activi	OATE 12/U-
CONDITIONS F APPROVAL, IF ANY:		

RECEIVED

007 - 61970

OIL CLINCERVACION COMM. ROBBS, N. III.