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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 [X] Fee [ ]

5. State Oil & Gas Lease No.: B-0385

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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name: -

2. Name of Operator: TEXACO Inc.

8. Farm or Lease Name: New Mex. 'AN' State

3. Address of Operator: P. O. Box 728, Hobbs, New Mexico 88240

9. Well No.: 1

4. Location of Well: UNIT LETTER N, 660 FEET FROM THE South LINE AND 1982 FEET FROM THE West LINE, SECTION 22 TOWNSHIP 14-S RANGE 33-E NMPM.

10. Field and Pool, or Wildcat: Saunders Permo Penn

15. Elevation (Show whether DF, RT, GR, etc.): 4216' (DF)

12. County: Lea

16. 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	[X]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]			COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]	CHANGE PLANS	[ ]	CASING TEST AND CEMENT JOB	[ ]		
OTHER	[ ]			OTHER	[ ]		

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.

1. Set CIBP at 9800' with 35' (5 sx) cement on top.
2. Load hole with mud (25 sx gel per 100 bbls. water, brine or produced, wherever possible).
3. Run free point, cut 5½" casing and pull.
4. Spot 100' (40 sx) cement plug across casing stub.
5. Spot 100' (40 sx) cement plug across 8-5/8" casing shoe at 4165'.
6. Spot 20' (7 sx) cement plug at surface.
7. Install marker and clean location.

* 8. 100' plug at top Abo

* 9. 100' plug at top Glorieta if not behind pipe

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

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 6-11-76

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

* not above

(Both 13⅜ & 8⅝ circulated.)