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NEW MEXICO OIL CONSERVATION COMMISSION

Hobbs Office  
JUL 2 4 30 PM '69

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.	

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	
2. Name of Operator TEXACO Inc.		8. Farm or Lease Name H. H. Harris	
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240		9. Well No. 3	
4. Location of Well UNIT LETTER <u>X 71</u> , <u>990</u> FEET FROM THE <u>West</u> LINE AND <u>660</u> FEET FROM THE <u>South</u> LINE, SECTION <u>35</u> TOWNSHIP <u>12-S</u> RANGE <u>38-E</u> NMPM.		10. Field and Pool, or Wildcat Bronco (Wolfcamp)	
15. Elevation (Show whether DF, RT, GR, etc.) 3790' (GR)		12. County Lea	

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

The following work has been completed on subject well:

1. Pulled production rods and tubing.
2. Ran tubing w/packer and set @8955'.
3. Acidized casing perforations 9077-93' w/3000 gals 28% NE Acid in 3 equal stages following each stage w/1000 gals treated water separated w/100# Unibeads.
4. Well completed ASD (Abandoned, Salvage Deferred) - Held for Salt Water Disposal. Job complete 7:00 AM, July 2, 1969.

Note: Request that the allowable be set @ Zero (0).

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

SIGNED <u>[Signature]</u>	TITLE <u>Assistant District Superintendent</u>	DATE <u>July 2, 1969</u>
APPROVED BY <u>[Signature]</u>	TITLE <u>SUPERVISOR DISTRICT #</u>	DATE <u></u>
CONDITIONS OF APPROVAL, IF ANY:		