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OPERATOR		

# 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 checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. State B-11264	
7. Unit Agreement Name	
8. Farm or Lease Name (NCT-1) New Mexico 'BY' State	
9. Well No. 2	
10. Field and Pool, or Wildcat Lazy 'J' Penn	
12. County Lea	

**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 ☐ GAS WELL ☐ OTHER-

2. Name of Operator  
TEXACO Inc.

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

4. Location of Well  
UNIT LETTER A 660 FEET FROM THE North LINE AND 990 FEET FROM  
THE East LINE, SECTION 35 TOWNSHIP 13-S RANGE 33-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
4219' DF

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Extension Request</u> <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <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.

## REMARKS

1. WELL STATUS - Shut In
2. TEMPORARY ABANDONMENT DATE - January, 1974
3. REASON FOR ABANDONMENT - Not profitable to operate.

4. FUTURE PLANS - Plug and abandon

5. DATE OF FUTURE WORKOVER OR PLUGGING - 1976

*Expires 11/1/77*

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

SIGNED _____	TITLE <u>Asst. Dist. Supt.</u>	DATE <u>11-18-75</u>
APPROVED BY <u>John Runyan</u>	TITLE _____	DATE <u>11/18</u>
CONDITIONS OF APPROVAL, IF ANY: <u>Geologist</u>		