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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

OCT 20 11 25 AM '65

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
State - E-9247

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 State N.M. "DA" NCT-1
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico	9. Well No. 1
4. Location of Well UNIT LETTER D 810 FEET FROM THE West LINE AND 660 FEET FROM THE North LINE, SECTION 14 TOWNSHIP 12-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat Ranger Lake (Penn)
15. Elevation (Show whether DF, RT, GR, etc.) 4166' (D. F.)	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 ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
Perforations & Acidizing ☒

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.

Total Depth - 10,400'
2 7/8" O. D. Casing Cemented at 10,400'

Perforate 2 7/8" O. D. Casing with one jet shot per foot from 10,158' to 10,166'. Acidize with 500 gals acetic acid. Swab well. Set bridge plug at 10,108' and dump 12' of hydromite on top of plug.

Perforate 2 7/8" O. D. Casing with one jet shot at 9960', 9962', 9976', 9984', 9986', 9992', 9996', and 9998'. Acidize with 500 gals acetic acid. Swab well. Squeeze with 50 Sx. cement.

Perforate 2 7/8" O. D. Casing with one jet shot at 9960', 9962', 9976', 9984', and 9986'. Acidize with 500 gals 15% NE acid. Swab well. This report as of 7:00 A. M. October 19, 1965.

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

SIGNED H. D. Raymond TITLE District Superintendent DATE October 19, 1965

H. D. Raymond

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: