

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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CONSERVATION DIVISION  
P. O. BOX 2038  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease  
State ☒ Fee ☐  
5. State Oil & Gas Lease No.  
**06-1546**

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <b>Water Disposal Well</b>	7. Unit Agreement Name -
2. Name of Operator <b>TEXACO INC.</b>	8. Farm or Lease Name <b>N.M. "DM" St. NCT-1</b>
3. Address of Operator <b>P.O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>N</b> <b>660</b> FEET FROM THE <b>South</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>21</b> TOWNSHIP <b>13-S</b> RANGE <b>33-E</b> MNPM.	10. Field and Pool, or Wildcat <b>Lazy J Penn</b>
15. Elevation (Show whether DF, RT, CR, etc.) <b>4266' (DF)</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER **Repair tubing leak** ☒

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. Rigged up. Test tubing in hole to 5000#. Tubing leak indicated. Pull tubing. Replace bad joints.
2. Ran 2-3/8" plastic coated tubing w/nickel coated lok-set packer & set @ 9552'.
3. Load annulus w/inhibited water.
4. Test to 600#. Tested OK.
5. Returned well to water disposal, 8-3-79.

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

SIGNED 

TITLE **Asst. Dist. Supt.**

DATE **8-13-79**

Orig. Signed by  
**Jerry Sexton**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE **AUG 15 1979**

CONDITIONS OF APPROVAL **Dist. In Supv**

RECEIVED

AUG 14 1973

O.C.D. HOBBS, OFFICE

## DISTRIBUTION

SANTA FE

FILE

U.S.G.S.

LAND OFFICE

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 ☒ Fee ☐

## 5. State Oil &amp; Gas Lease No.

06-1516

## SUNDRY NOTICES AND REPORTS ON WELLS

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 USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <b>Water Disposal Well</b>		7. Unit Agreement Name -
2. Name of Operator <b>TEXACO INC.</b>		8. Farm or Lease Name <b>NCT-1</b> <b>New Mexico "DM" State</b>
3. Address of Operator <b>P.O. Box 728, Hobbs, New Mexico 88240</b>		9. Well No. <b>1</b>
4. Location of Well UNIT LETTER <b>N</b> <b>660</b> FEET FROM THE <b>South</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE, SECTION <b>21</b> TOWNSHIP <b>13-S</b> RANGE <b>33-E</b> NMPM.		10. Field and Pool, or Wildcat <b>Lazy J Penn</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>4266' DF</b>		12. County <b>Lea</b>

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

## NOTICE OF INTENTION TO:

 PERFORM REMEDIAL WORK ☐

 TEMPORARILY ABANDON ☐

 PULL OR ALTER CASING ☐

 PLUG AND ABANDON ☐

 CHANGE PLANS ☐

 OTHER ☐

## SUBSEQUENT REPORT OF:

 REMEDIAL WORK ☐

 COMMENCE DRILLING OPNS. ☐

 CASING TEST AND CEMENT JOB ☐

 OTHER ☐

 ALTERING CASING ☐

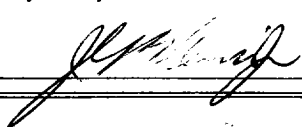
 PLUG AND ABANDONMENT ☐

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.

Status of subject well changed from Shut-In to Water Disposal 9-12-75.

Ran 9619' 2 3/8" OD 4.60# Butt. Tubing - New - Plastic Coated.

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

 SIGNED 

 TITLE **Assistant District Supt.**

 DATE **10-22-75**

 APPROVED BY 

TITLE

 DATE **10-27-75**

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 25 1975

U.S. DEPARTMENT OF COMMERCE  
HARRIS, R. M.