| NO. OF COPIES RECEIVED                    |   | Form C-103                              |
|---|---|---|
| DISTRIBUTION                              |   | Supersedes Old                          |
| SANTA FE                                  | NEW MEXICO OIL CONSERVATION COMMISSION  | C-102 and C-103<br>Effective 1-1-65     |
| FILE                                      |   |   |
| U.S.G.S.                                  |   | 5a. Indicate Type of Lease              |
| LAND OFFICE                               |   | State X Fee.                            |
| OPERATOR                                  |   | 5, State Oil & Gas Lease No.            |
|   |   | 06-1516                                 |
| DO NOT USE THIS FORM FOR PR               | RY NOTICES AND REPORTS ON WELLS  OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  TION FOR PERMIT _''' (FORM C-101) FOR SUCH PROPOSALS.) |   |
| l. OiL GAS WELL WELL                      | OTHER-  | 7. Unit Agreement Name                  |
| 2. Name of Operator                       |   | 8. Farm or Lease Name NCT-1             |
| TEXACO Inc.                               |   | N. M. 'DM' State                        |
| 3. Address of Operator                    |   | 9. Well No.                             |
| P. O. Box 728, Ho                         | bbs, New Mexico 88240   | 1                                       |
| 4. Location of Well                       | 00410   | 10. Field and Pool, or Wildcat          |
| N NIT LETTER N                            | 660 FEET FROM THE South LINE AND 1980 FEET FROM   | Lagre T Bann                            |
|   | FEET FROM THE DOUGHT LINE AND 1900 FEET FROM  | minimization.                           |
| THE West LINE, SECTI                      | ON 21 TOWNSHIP 13-S RANGE 33-E NMPM   |   |
|   | 15. Elevation (Show whether DF, RT, GR, etc.)   | 12. County                              |
|   | 4266' DF  | Lea                                     |
| Check                                     | Appropriate Box To Indicate Nature of Notice, Report or Ot  | her Data                                |
| NOTICE OF II                              | NTENTION TO   | T REPORT OF:                            |
| <del></del> -                             |   |   |
| PERFORM REMEDIAL WORK                     | PLUG AND ABANDON REMEDIAL WORK  | ALTERING CASING                         |
| TEMPORARILY ABANDON                       | COMMENCE DRILLING OPNS.   | PLUG AND ABANDONMENT                    |
| PULL OR ALTER CASING                      | CHANGE PLANS CASING TEST AND CEMENT JOB   |   |
|   | OTHER Change of   | Status                                  |
| OTHER                                     |   |   |
| 17 Describe Proposed or Completed Or      | perations (Clearly state all pertinent details, and give pertinent dates, including   |   |
| work) SEE RULE 1103.                      | to the pertinent details, and give pertinent dates, including   | estimated date of starting any proposed |
|   |   |   |
|   |   |   |
| Piassa.                                   | change the status of miles at 1, 22 a   |   |
| riease (                                  | change the status on subject well from p  | oumping to                              |
| Agn /Ah                                   | endoned Columns Deformed)   |   |
| ADD (ADD                                  | andoned-Salvage Deferred) and cancel the  | allowable                               |
| affects:                                  | ve 9-22-72.   |   |
| 6176001                                   | ve y-zz-(z.   |   |
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|   |   |   |
|   |   |   |
| 18. I hereby certify that the information | above is true and complete to the best of my knowledge and belief.  |   |
| \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\    | and petter,   |   |
| Jelle II                                  | Anat Mark many  | <b></b>                                 |
| SIGNED SECURY                             | TITLE Asst. Dist. Supt.   | DATE 10-4-72                            |
|   | Orig. Signed by   | OCT 5 1972                              |
|   | Top D. Roman  | QQ ( 3 13/2                             |
| APPROVED BY                               | Dist. I, Supv.  | DATE                                    |
| CONDITIONS OF APPROVAL, IF ANY:           |   |   |

RECEIVED

OF CARSLEAVIOR CARRY