

COPIES RECEIVED		
DISTRIBUTION		
SANITARY		
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 <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. K-6678-1	

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 New Mexico 'DP' St.
3. Address of Operator P. C. Box 728, Hobbs, New Mexico 88240		9. Well No. 1
4. Location of Well UNIT LETTER B , 810 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 19 TOWNSHIP 12-S RANGE 34-E NMPM.		10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 4199' (GR)		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 <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 checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <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.

TOTAL DEPTH 350'
Spud 17½" Hole 6:30 AM, 1-9-76

1. Ran 339' (9 Jts.) 13 3/8" OD 48# H-40 casing & set @ 350'.
2. Cement w/550' sx. Class 'C' Cement w/2% CaCl. Job Complete 6:30 AM, 1-10-76.
3. Cement Circulated.
4. Test 13 3/8" OD Casing w/600# for 30 minutes, 11:30-12:00 Midnight, 1-10-76. Tested O.K..
5. Drill out cement.
6. Re-test Casing w/600# for 30 Minutes, 2:00-2:30 A.M., 1-11-76. Tested O.K..
7. Job Complete 2:30 A.M., 1-11-76.

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

SIGNED *W. J. Smith* TITLE **Asst. Dist. Supt.** DATE **1-16-76**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: