

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-28145 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-9505
7. Lease Name or Unit Agreement Name NEW MEXICO "AT" STATE
8. Well No. 10
9. Pool name or Wildcat SAUNDERS PERMO UPPER PENN
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4212' GR

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	2. Name of Operator Texaco Exploration and Production Inc.
3. Address of Operator P. O. Box 730 Hobbs, NM 88240	4. Well Location Unit Letter <u>K</u> : <u>1650</u> Feet From The <u>SOUTH</u> Line and <u>2305</u> Feet From The <u>WEST</u> Line Section <u>15</u> Township <u>14-S</u> Range <u>33-E</u> NMPM LEA
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4212' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: CONVERSION TO WATER INJ, ORDER R-9616 <input checked="" type="checkbox"/>

12. 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.

- 12/23/92 - 1/4/93
1. MIRU. TOH W/ PROD EQUIP. C/O TO 9986'.
 2. PERFD ADD'L PERMO PENN PAY IN 5 1/2" CSG W/ 2 JSPF FR 9940'-42' (TOTAL 2 INT, 4 HLES)
 3. SET 5 1/2" PKR @ 9670', LOADED BACKSIDE & TESTED CSG, ACIDIZED PERMO PENN PERFS W/ 5200 GALS 20% HCL NEFE. MAX P = 2700#, AIR = 6.6 BPM. TOH W/ PKR.
 4. TIH W/ 5 1/2" IPC MODEL R PKR, TESTED TBG IN HOLE, CIRCD PKR FLUID & SET PKR @ 9702'. TESTED CSG TO 300# FOR 30 MIN, OK.
- INJECTION STARTED ON 1/5/93, INJ RATE 2998 BWPD ON VACUUM
(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

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

SIGNATURE Monte C. Duncan TITLE ENGINEER'S ASSISTANT DATE 1/11/93
TYPE OR PRINT NAME MONTE C. DUNCAN TELEPHONE NO. 393-7191

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

JAN 13 1993

Total pay interval 9762-9942