

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
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.

B-9385

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 "AN" State
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 11
4. Location of Well UNIT LETTER D 660 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 22 TOWNSHIP 14-S RANGE 33-E NMPN.	10. Field and Pool, or Wildcat Saunders Permo Upper Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4205' (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 checked="" 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.

SPUD 17½" HOLE, 7:00AM, 7-5-83
TOTAL DEPTH 500'

1. Ran 487' (13 Jts.) 13 3/8" OD 48# H-40 Csg & Set @ 500'.
2. Cemented W/600 Sx Class 'H' Cement. Cement Circulated. Job Complete 3:30 PM, 7-5-83.
WOC in excess of 18 hrs.
3. Tested 13 3/8" Csg to 600# for 30 minutes, 4:00-4:30 PM, 7-6-83. Tested OK.
Job complete 4:30 PM, 7-6-83.

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

SIGNED [Signature] TITLE Asst. Dist Mgr. DATE 7-7-83

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

TITLE _____ DATE JUL 11 1983

CONDITIONS OF APPROVAL, IF ANY: