## STATE OF NEW MEXICO ENERGY AND MENERALS DEPARTMENT

ALOT MIGHT TELEVISION CO.		
HD. OF COPIED SCEENED		
DISTRIBUTION		
SANTA PE		
FILE		
U.S.G.S.		<u> </u>
LAND OFFICE		
OPERATOR	1	

## **GIL CONSERVATION DIVISION** P. O. BOX 2088

Form C-103

APR 1.2 1984

SANTA PE	SANTA FE, NEW MEXICO 87501	K641269 10-1-73
FILE	DANTA L, REW MEXICO 01001	5a. Indicate Type of Lease
U.S.G.S.		State X Fre
LAND OFFICE		5. State Oil & Gas Lease No.
OPERATOR		1
	30-025-28645	B-9560
SUNDE	Y NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PARTIES USE "APPLICAT	POSALS TO DRILL ON TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. 10H FOR PERMIT '' (FORM C-101) FOR SUCH PROPOSALS.)	
1.		7. Unit Agreement Name
OIL X SAS WELL	OTHER-	_
2. Name of Operator		8. Farm or Lease Name
		N. M. 'BG' St. NCT-2
TEXACO Inc.		9. Well No.
3. Address of Operator	- N N 00040	4
	bs, New Mexico 88240	Saunders Permo Wildcon
4. Location of Well		
B B	990 FEET PROM THE North LINE AND 2309 FEET	FROM Upper Pepp
<b>U</b>		
East LINE. SECT	ON 16 TOWNSHIP 14-S MANGE 33-E N	MPM. (
THE LINE, SECT	ON	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	4225' (GR)	Lea (IIIIII)
16. Charle		
Check	Appropriate Box To Indicate Nature of Notice, Report of	r Other Data
NOTICE OF I	NTENTION TO: SUBSEQU	JENT REPORT OF:
•	<u></u>	,
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORANILY ABANDON	COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	]
AREE ON XELEN CUSING	OTHER	
• .		
OTHER		
17. Describe Proposed or Completed C	perations (Clearly state all pertinent details, and give pertinent dates, incl	luding estimated date of starting any proposed
work) SEE RULE 1 103.		
	SPUD 17 1/2" HOLE, 12:00 NOON, 4-4-	84
	TOTAL DEPTH 560'	
1. RAN 5	45' (13 JTS) 13 3/8" OD 48# H-40 CSG AN	D SET @ 560'.
2. CEMENTED W/600 SX CLASS H CEMENT CONTAINING 2% CACL AND		
1/4#	FLOCELE PER SACK. CEMENT CIRCULATED	. JOB COMPLETE
5.30	AM, 4-5-84. WOC 18 HRS.	
3. TESTE	13 3/8" CASING TO 600# FOR 30 MINUTES	. 12:00 MIDNIGHT-
3. 1E21E	AM, 4-6-84. TESTED OK. JOB COMPLETE	12:30 AM. 4-6-84.
12:30	MM, 4-0-04. INDIED ON: BOD COMMENTE	
•		
	<u> </u>	
18 I hereby certify that the informati	on above is true and complete to the best of my knowledge and belief.	
10. I hereby colors, and the		

TITLE Asst Dist Mar

DISTRICT I SUPERVISOR CONDITIONS OF APPROVAL, IF ANY

ORIGINAL SIGNED BY JERRY SEXTON