

CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

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SANTA FE		
FILE		
U.S.G.B.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-9380	

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.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator TEXACO Inc.	8. Farm or Lease Name N. M. 'AQ' St. NCT-11
Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 3
Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM West 3 LINE, SECTION 14-S TOWNSHIP 33-E RANGE NMPM.	10. Field and Pool, or Wildcat Lazy J Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4225' (GR)	12. County Lea

6. 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 type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

7. 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 4159'
13 3/8" OD 54.5# J-55 CSG SET @ 527'

1. RAN 4149' (97 JTS) 8 5/8" OD 32# J-55 CASING AND SET @ 4159'.
2. CEMENTED W/1800 SX HLW CEMENT CONTAINING 15# SALT AND 1/4# NFLOCELE PER SX FOLLOWED BY 200 SX CLASS H CEMENT CONTAINING 1/4# FLOCELE PER SACK. CEMENT CIRCULATED. JOB COMPLETE 9:45 AM, 9-9-84. WOC IN EXCESS OF 18 HRS.
3. TESTED 8 5/8" CASING TO 1500# FOR 30 MINUTES, 9:00-9:30 AM, 9-10-84. TESTED OK. JOB COMPLETE 9:30 AM, 9-10-84.

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

CHECKED <u> </u>	TITLE <u>Asst Dist Mar</u>	DATE <u>9-13-84</u>
ORIGINAL SIGNED <u> </u>	TITLE <u> </u>	DATE <u>SEP 18 1984</u>

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY: