State of New Mexico
Energy nerals and Natural Resources Department

Form C-103 Revised 1-1-89

NSTRICT I

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

PULL OR ALTER CASING

CONDITIONS OF APPROVAL, IF ANY:

OTHER:

OIL CONSERVATION DIVISION

P.O. Box 2088

ell api no.	30-025-05248
	30-025-0524

0 . W . T . T . A . A . A . A . A . A . A . A	·			
P.O. Drawer DD, Artesia, NM \$8210 Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE FEE			
DISTRICT III 1000 Rio Brazos Rd., Azzoc, NM 87410	6. State Oil & Gas Lease No. B-8944			
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.)	7. Lease Name or Unit Agreement Name Mexico "F"			
1. Type of Well: OIL GAS WELL X WELL OTHER				
2 Name of Operator Texaco Exploration and Production Inc.	8. Well No.			
3. Address of Operator P.O. Box 730 Hobbs, New Mexico 88240	9. Pool name or Wildcat Denton Devonian			
4. Well Location Unit Letter E: 1980 Feet From The North Line and 660	Feet From The West Line			
	NMPM Lea County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3816 ' DF				
11. Check Appropriate Box to Indicate Nature of Notice, Re	eport, or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	X ALTERING CASING			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT			

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting vny proposed work) SEE RULE 1103.

7/22/92 - 7/27/92

 MIRU. Set pkr, pmpd 200 gals xylene mixed w/110 gal asphalteen dispersant & 5 gals demulsifier. Followed w/ 10 bbls cil, overflushed w/ 100 BFW.

OTHER:

CASING TEST AND CEMENT JOB !

- 2. Acidized Devonian perfs 12,497' 12,512' w/ 2000 gals 15% HCL NEFE. Max P = 2750#, AIR = 3 BPM. Swabbed load back.
- Scale sqzd w/ 275 gals scale inhibitor in FW, overflushed w/ 5 gals demulsifier in 130 BFW. Returned well to prod.

OPT 8-18-92 0 BOPD, 960 BWPD, 0 MCF

I hereby certify that the information above is true and complete to the best of my knowled stonature.		9-14-92
TYPEORPRINT NAME M.C. Duncan		TELE PHONE NO. 393-7191
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON APPROVED BY	mu	SEP 16 '92

RECEIVED SEP 1 5 1992

OCO HOBBS OFFICE