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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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

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 W E Dickinson	
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240		9. Well No. 1	
4. Location of Well UNIT LETTER <u>A</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>12</u> TOWNSHIP <u>15-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat Undesignated	
15. Elevation (Show whether DF, RT, GR, etc.) 3783 GR		12. County Lea	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

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.

Total Depth 365'

Spudded 13-3/4" hole 6:00 AM, December 5, 1969

Ran 341' (12 joints) 11-3/4" O.D. 42# casing and cemented @360' w/350 sx Class 'C' cement w/1% CaCl. Plug @335'. Cement circulated. Job complete 12:05 PM, December 7, 1969.

Tested 11-3/4" O.D. w/600# for 30 minutes from 2:00 to 2:30 AM, December 8, 1969. Tested OK. Drilled out cement plug and re-tested for 30 minutes from 8:15 to 8:45 AM, December 8, 1969. Job complete 8:45 AM, December 8, 1969.

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

SIGNED [Signature] TITLE Assistant District Superintendent DATE December 10, 1969
APPROVED BY [Signature] TITLE DATE
CONDITIONS OF APPROVAL, IF ANY: