## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT II P.O. Box 2088 Santa Fe, New Mexico 87504-2088 DISTRICT III P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 DISTRICT III  CON DISTRICT III  SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEFEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.  1. Type of Welt. DISTRICT III  2. Name of Operator DISTRICT III DISTRICT III DISTRICT III DISTRICT III  CORM C-101) FOR SUCH PROPOSALS.  1. Type of Welt. DISTRICT III DIST	P.O. Box 2088  30-025-34662  DISTRICT II  P.O. Box Drawer DD, Artesia, NM 88210  Santa Fe, New Mexico 87504-2088  5. Indicate Type of Lease STATE FEE  TOOR TO THE TYPE OF LEASE STATE FEE  TOOR TO SUCH PROPOSALS TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS. TYPE OF WEIL GAS WELL GAS WELL OTHER NEW DRILL SOUTH Line and 2310  TEXACO EXPLORATION & PRODUCTION INC.  3. Address of Operator TEXACO EXPLORATION & PRODUCTION INC.  4. Well Location Unit Letter N : 660 Feet From The SOUTH Line and 2310 Feet From The WEST Line Section 14 Township 16-S Range 32-E NMPM LEA COUNTY  10. Elevation (Show whether DF, RKB, RT, GR, etc.)  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPERATION PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPERATION PLUG AND ABANDON CASING STEST AND CEMENT JOB OTHER: INTERMEDIATE CSG  12. 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.	P.O. Box 1980, Problem Note   P.O. Box 2088   30-025-34662	OIL CONSERVATION DIVISION	WELL API NO.
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NUBOP STACK.			9-10-99: RAN 103 JTS OF 8 5/8" LS65 LTC CSG W/3 CENTRALIZERS ON BTM THREE ITS CMTD	W/1527 SY 25/65 DOZ LL CW OCL TOV OALT

I hereby certify that the information about	Strue and complete the prest of my knowledge and belief.    Section 2015	DATE 9/11/99
TYPE OR PRINT NAME	J. Denise Leake	Telephone No. 397-0405
(This space for State Use)  APPROVED	ORIGINAL SELECTION OF A CHARLES AND DISTRICT ESCRETAINS	Mary 1
BUNDITIONS OF APPROVA		DATE DeSoto/Nichols 12-93 ver 1.0