State of New Mexico

Form C-103

Submit 3 copies to Appropriate District Office	Energy, Minerals and Natural Resources Department					Revised 1-1-89		
DISTRICT I	OII	CONSERVA	TIO	N DIVISION	WELL API NO.			
	lox 1980, Hobbs, NM 88240 P.O. Box 2088					30 025 02257		
DISTRICT II		Santa Fe, New Me		87504-2088	5. Indicate Typ	_		
P.O. Box Drawer DD, Artesia, NM 88210						STATE 🔀	FEE [
DISTRICT III	07410				6. State Oil / G	ias Lease No. B-1306		
1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELL SUNDRY NOTICES AND REPORTS ON WELL								
(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.)						or Unit Agreement Name		
					VACUUM GR	AYBURG SAN ANDRES U	nit	
CAS CAS					1			
1. Type of Well: OIL S GAS OTHER								
2. Name of Operator					8. Well No.	11		
TEXACO EXPLORATION & PRODUCTION INC					0.5.111	- Mildoot		
3. Address of Operator 205 E. Bender, HOBBS, NM 88240					9. Pool Name (Va	or wildcat cuum Grayburg San Andres		
4. Well Location Unit Letter	N · 660	Feet From The	South	Line and	Feet From T	he <u>West</u> Line		
1					/PM	Lea COUNTY		
Section1	Town							
	10.	Elevation (Show whether	DF, RK	S. RT,GR, etc.)				
11	Objects Approp	rista Roy to Indicat	e Nat	ure of Notice, Repor	t. or Other D	Data		
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF:								
NOTICE OF IN					_			
PERFORM REMEDIAL WORK	☐ PLUG	AND ABANDON		REMEDIAL WORK	\boxtimes	ALTERING CASING	. H	
TEMPORARILY ABANDON	CHAN	GE PLANS		COMMENCE DRILLING OP		PLUG AND ABANDONMEN	' Ц	
PULL OR ALTER CASING	H			CASING TEST AND CEME	NT JOB		_	
OTHER:				OTHER:			∐	
						ding actimated date of St	arting	
12. Describe Proposed or Co any proposed work) SEE	ompleted Operation RULE 1103.	ins (Clearly state all pe	ertinent	details, and give pertine	ent dates, inclu	ding estimated date of se	ui tii ig	
All remediation is complete on	location							
All remediation is complete on	, rodunori.							

DATE 4-14-99 _ TITLE _ EH&S Representative Rodney G. Bailey Telephone No. TYPE OR PRINT NAME

OIL & GAS INSPECTOR