## Submit 3 conies

## State of New Mexico

to Appropriate District Office	Enc. , Minerals and Natural Resources Department						Form C-103 Revised 1-1-8
DISTRICT		OIL CONSED	<b>37 A T</b> Y	ON DIVISION	WELL API NO		Revised 1-1-8
P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION							
DISTRICT II P.O. Box 2088						30-025-02258	
P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088						Γγpe of Lease STATE [∑	] FEE [
DISTRICT III						/ Gas Lease No.	1 .cc [
1000 Rio Brazos Rd., Aztec, NM 87410					o. otato on	B-1308	
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.)						me or Unit Agreement RAYBURG SAN AND	
1. Type of Well: OIL WELL		GAS WELL OTHER					
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.					8. Well No.	10	
3. Address of Operator P.O. BOX 730, HOBBS, NM 88240					9. Pool Name or Wildcat VACUUM GRAYBURG SAN ANDRES		
4. Well Location							ANDINES
Unit Letter <u>M</u> : <u>660</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line							
Section 1		vi		Range <u>34E</u> NM	1PM	LEA CO	YTNL
		10. Elevation (Show when	ther DF, Ri	(B, RT,GR, etc.)			
11.	Check A	ppropriate Box to Indi	cate Na	ture of Notice, Report	, or Other I	Data	
NOTICE OF	INTENTIO	ON TO:		SI	IBSEQUE	NT REPORT O	E.
PERFORM REMEDIAL WOR		PLUG AND ABANDON		REMEDIAL WORK			
TEMPORARILY ABANDON		CHANGE PLANS	H	REMEDIAL WORK  ALTERING CASING  COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT			
PULL OR ALTER CASING			ليا	CASING TEST AND CEMENT JOB			
OTHER:			🗆	OTHER:			
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.							
3/1/94 - 3/16/94							
1. MIRU, TOH W/ RODS & CIRCD HOLE CLEAN.	PMP, INSTA	ALLED BOP, TOH W/ TBG.	C/O TO	4710', UNDERREAMED FF	ROM CASING	SHOE FROM 4135'-4	710'.
2. SET PKR @ 3986', ACI	DIZED OH FI	R 4135'-4710' W/ 8000 GAL	S 15% NE	FE. MAX P = 1968#, AIR =	4.5 BPM. SV	VABBED SACK LOAD	).
3. SCALE SQZD W/ 5 DRU	JMS TH-793	N 60 BFW, OVERFLUSHE	D W/ 493	BFW.			
4. TIH W/ SUBMERSIBLE	PUMP & RET	URNED WELL TO PRODU	ICTION.				
OPT 5-1-94 PUMPING BY SUBMERSIBLE PUMP 122 BOPD, 408 BWPD, 130 MCFD							

I hereby certify that the information above is true and SIGNATURE	DATE 5/12/94		
TYPE OR PRINT NAME	Monte C. Duncan	Telephone No. 397-0418	
[This space for State Use]	ORIGINAL DIGNED BY HE BY STATON		
APPROVED BY	TITLE DIFFERENCE CONTROL OF THE PARTY OF THE	DATE MAY 1 3 1994	
CONDITIONS OF APPROVAL, IF ANY:		DATE_TIA: 1.3 1994	