STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: B-867

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. Unit Agreement Name: Vacuum Grayburg San Andres Unit

OIL WELL [X] GAS WELL [ ] OTHER-

2. Name of Operator: TEXACO Inc.

8. Farm or Lease Name: Vacuum Grayburg San Andres Unit

3. Address of Operator: P. O. BOX 728, Hobbs, New Mexico 88240

9. Well No.: 54

4. Location of Well: UNIT LETTER A, 675 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 2 TOWNSHIP 18-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat: Vacuum Grayburg San Andres

15. Elevation (Show whether DF, RT, GR, etc.): 4001' (GR)

12. County: Lea

16. 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 [X]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		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.

1. Rigged up. Pull rods & pump. Install BOP. Pull tubing.
2. Log well. Clean out to 4710'.
3. Set pkr @ 4360'. Acidize open hole 4360-4710' w/1000 gals 15% NE acid. Set 1 Hr. Acidize w/4000 gals 15% NE acid in 2 equal stages using 600# rock salt & 400# Benzoic Acid Flakes between stages.
4. Frac w/40,000 gals Cross-lined gel & 44,000# 20/40 & 10/20 sand in 2 equal stages using 750# salt & 250# Benzoic acid flakes between stages. Flushed w/55 Bbls. 2% KCl water.
5. Install pumping equipment. Test & return to production.

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

SIGNED J. A. Schuffer TITLE Asst. District Supt. DATE 8-30-79

APPROVED BY Orig. Signed by Jerry Sexton Dist. I, Supv. TITLE DATE AUG 30 1979

CONDITIONS OF APPROVAL, IF ANY: