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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 [X] Fee [ ]

5. State Oil & Gas Lease No.: B-2341

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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name: West Vacuum Unit

2. Name of Operator: Texaco Inc.

8. Farm or Lease Name: West Vacuum Unit

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

9. Well No.: 43

4. Location of Well: UNIT LETTER D, 330 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE, SECTION 3, 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.): 440' (DF)

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. Rig up. Pull production equipment. Install BOP
2. Set packer @ 4205'.
3. Spot open hole section 4234'-4787' w/250 gal xylene acid & Displace w/17 bbls wtr follow w/750 gal xylene acid & displace w/17 bbl wtr.
4. Acidize w/3500 gal 15% gelled acid in 3-stages as follows:
   500 gal followed by 500 # salt blk in acid
   1500 gal followed by 500 # salt blk
   1500 gal followed by 75 bbls salt water.
5. Ran pumping equipment. Test and return to production.

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

SIGNED [signature] TITLE Asst. Dist. Supt. DATE 10-18-76

APPROVED BY [signature] TITLE [ ] DATE [ ]

CONDITIONS OF APPROVAL, IF ANY: