State of New Mexico

Form C-103 Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office DISTRICT OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 3002502282 DISTRICT II Indicate Type of Lease Santa Fe. New Mexico 87504-2088 P.O. Box Drawer DD, Artesia, NM 88210 STATE [X] FEE 🔲 DISTRICT III 6. State Oil / Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 858150 SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" WEST VACUUM UNIT (FORM C-101) FOR SUCH PROPOSALS.) OIL GAS 1. Type of Well: \times WELL **OTHER** 8. Well No. 2. Name of Operator 46 **TEXACO EXPLORATION & PRODUCTION INC** 9. Pool Name or Wildcat 3. Address of Operator 205 E. Bender, HOBBS, NM 88240 VACUUM GRAYBURG SAN ANDRES 4. Well Location , Feet From The NORTH Line and 660 660 Feet From The EAST Unit Letter __

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PLUG AND ABANDON REMEDIAL WORK ALTERING CASING PERFORM REMEDIAL WORK CHANGE PLANS COMMENCE DRILLING OPERATION | | PLUG AND ABANDONMENT TEMPORARILY ABANDON CASING TEST AND CEMENT JOB PULL OR ALTER CASING C/O, ACIDIZE, SCALE SQUEEZE \times OTHER: OTHER:

10. Elevation (Show whether DF, RKB, RT,GR, etc.)

Range 34E

NMPM

10-04-99: MIRU, TOH W/RDS & PMP, NUBOP, RU TESTERS, TIH W/BIT & BAILER, TEST TBG TO 3880'.

Township 18S

10-05-99: C/O 4735-4761'. TIH W/PKR SET @ 4137'.

10-06-99: ACIDIZE OH 4234-4773' W/6000 GALS 15% NEFE & 2750 LBS RK SLT.

10-07-99: CHEMICAL SQUEEZE W/2 DRUMS TH756 & 200 BBLS OF FLUSH. REL PKR. TIH W/PROD TBG TO 3880'.

10-08-99: TIH & TAG @ 4265'. TIH W/BIT. C/O TO 4760'.

10-09-99: RETURN TO PRODUCTION.

Section 3

10-20-99: ON 24 HR OPT. PUMPED 24 BO, 148 BW, & 1 MCF.

FINAL REPORT

Thereby cartify that the information above is the and complete to the best of my knowledge and belief. SIGNATURE In the information above is the and complete to the best of my knowledge and belief. Engineering Assistant		DATE <u>11/04/1999</u>
TYPE OR PRINT NAME	J. Denise Leake	Telephone No. 397-0405
(This space for State Use)		1011 = 6 4000
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		

LEA COUNTY

^{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.