

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-3936
7. Lease Name or Unit Agreement Name West Vacuum Unit
8. Well No. 44
9. Pool name or Wildcat Vacuum Grayburg San Andres

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. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER Injection well

2. Name of Operator
Texaco Producing Inc.

3. Address of Operator
P.O. Box 730 Hobbs, N.M.

4. Well Location
Unit Letter C : 669 Feet From The North Line and 1980 Feet From The West Line

Section 3 Township 18S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4041 (DF)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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 6-4-90 thru 6-11-90

1. MIRV P.U. - NU BOP
2. TIH w/ 4.75 bit - DC - & 2.375 workstring - c/o to 4746
3. Spot 500 gal Ammonium Bicarbonate across OH 4201 - 4746
4. TOH w/bit - TIH w/pkr - TP set @ 4230
5. Acidize OH 4201 -4750 w/6000 gal 20% NEFE & 2000 lbs rock salt in 3 stages
Max 2600, Min 900, AIR 3.5 BPM, ISIP 2000, 15 min 1600
6. TOH w/pkr laying down WS - TIH w/pkr & inj tbg

Prior 11 BWPD @ 900 psi After 183 BWPD @ 1100 psi

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

SIGNATURE Richard DeSoto TITLE Engineering Technician DATE 7-28-90

TYPE OR PRINT NAME Richard DeSoto

TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: