Submit 3 Copies to Appropriate District Office

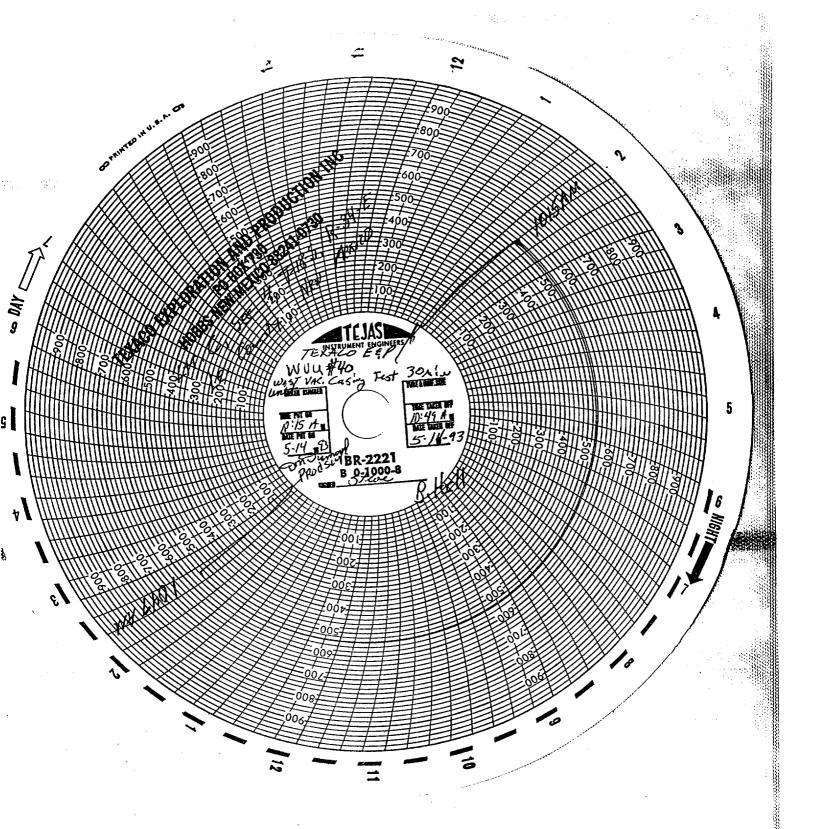
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION	ON DIVISION WELL API NO.
P.O. Box 26 P.O. Drawer DD, Artesia, NM 88210 P.O. Box 26 Santa Fe, New Mexico	700 1 . /
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	5. Indicate Type of Lease STATE X FEE
Aziec, NM 8/410	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WE	B-3936 · ELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPE DIFFERENT RESERVOIR. USE "APPLICATION FOR PL	COD DI LIO DI CILIDA I CALLELLI I
L (FORM C-101) FOR SUCH PROPOSALS 1	WEST VACUUM UNIT
1. Type of Well: Oil X WELL X OTHER	TO THE STATE OF TH
2. Name of Operator	8. Well No.
Texaco Exploration and Production Inc. 3. Address of Operator	40
P. O. Box 730 Hobbs, NM 88240	9. Pool name or Wildcat
4. Well Location	VACUUM GRAYBURG SAN ANDRES
Unit Letter C: 660 Feet From The NORTH	Line and 1980 Feet From The WEST Line
Section 4 Township 18-S Re	County
10. Elevation (Show whether	DF, RKB, RT, GR, etc.)
4022' D	F
11. Check Appropriate Box to Indicate 1	Nature of Notice, Report, or Other Data
HOUSE OF HATEIAHOM TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK . ALTERING CASING
TEMPORARILY ABANDON	COMMENCE PRIMARY
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB
OTHER:	
12. Describe Proposed or Committee C	OTHER: REPEAT CASING INTEGRITY TEST
 Describe Proposed or Completed Operations (Clearly state all pertinent details, and work) SEE RULE 1103. 	l give persinent dates, including estimated date of starting any proposed
THE ABOVE INJECTION WELL HAD FAILED A PREVIOUS CAS	ING INTEÓDITY TEOT
5-14-93	
 NOTIFIED NMOCD OF CASING INTEGRITY TEST. 	
 TESTED 5 1/2" CASING FROM SURFACE TO PACKER SET @ 30 MINUTES, HELD OK. 	4094' AS PER NMOCD GUIDELINES TO 530# FOR
3. RETURNED WELL TO INJECTION.	
(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)	
STATE OF THE STATE ON BACK)	
hereby certify that the information above is true and complete to the best of my knowledge and be	lid.
nous The Color	FNGINEED'S ASSISTANT
TYPE OR PRINT NAME MONTE C. DUNCAN	DATE 6-4-93
This space for State Use)	ТЕ ШЕРНОМЕ NO. 393-7191
ORIGINAL SIGNED BY JERRY SEXTON	
PPROVED BYDISTRICT I SUPERVISOR	Jun - 7 1993
ONDITIONS OF APPROVAL, IF ANY:	DATE

1 giv à Compensation



GCD HOBBS OFFICE