Submit 3 Copies to Appropriate District Office

State of New Mexico erals and Natural Resources Department Energy,

Form C-103 Revised 1-1-89

DISTRICTI

OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088		WELL API NO.
		30 025 02323 5. Indicate Type of Lease
DISTRICT III 1000 Rio Brizzos Rd., Aziec, NM 87410		STATE FEE 6. State Oil & Gas Lease No.
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 OIL WELL OTHER		7. Lease Name or Unit Agreement Name CENTRAL NACHUM WART
2. Name of Operator	OHER	8. Well No.
TEXACO EXPLORATION AND PRODUCTION INC.		127
3. Address of Operator		9. Pool name or Wildcat
P.D. BOX 730 HOBRS, NM BB240		VACUUM GRAYBURG SAN ANDRES
Unit Letter B : 330 Feet From Th	e N Line and 1	780 Feet From TheE Line
Section 12 Township	185 Range 34E	NMPM LEA County
10. El	evision (Show whether DF, RKB, RT, GR, etc.)	
11. Check Appropriate I	Box to Indicate Nature of Notice, I	Report, or Other Data BSEQUENT REPORT OF:
NOTICE OF INTERNIOR IN		DOEGUENT REPORT OF:
<u></u>	ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS, PLUG AND ABANDONMEN		
PULL OR ALTER CASING	CASING TEST AND	EMENT JOB L
OTHER:	U OTHER:	L
12. Describe Proposed or Completed Operations (Clearly state work) SEE RULE 1103.	e all pertinent details, and give pertinent dates, inc	luding estimated date of starting any proposed
1) NOTIFY OLD.		
2) T.O.H. WITH ALL APPOPULTION E	QUIPMENT.	
3) BY WIREHUE SET CIBP ABO	VE OPEN HOLE AT APPR	OK 4137.
4) BY WIRELINE CAP WITH 35	'CMT.	
5) CIRCULATE HOLE WITH INMBI	ted fluid	
W TEST CSG AND PLUG.		
I hereby certify that the information above is true and complete to the	p best of my knowledge and belief.	
SIGNATURE William T. Lack	PRODUCTION	N EMGR DATE 18-28-93

I hereby certify that the information above in true and complete to the best of my knowledge and belief.			
SIGNATURE William T. Lackey TIME PRODUC	TION ENGR DATE 18-28-93		
TYPE OR PRINT HAVE WILLIAM T. LACKEY	TELEPHONE NO.		
(This space for State Use)			

- TITLE -

APTROVED BY-

DISTRICT I SUPERVISOR

NEC 29 1993