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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SUNDARY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO RE-OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)		5a. Indicate Type of Lease State ☒ Fee ☐
		5. State Oil & Gas Lease No. B-1306
		7. Unit Agreement Name -
		8. Farm or Lease Name N.M. 'R' St. NCT-1
		9. Well No. 2
		10. Field and Pool, or Wildcat Vacuum Grayburg San Andre
1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-		
2. Name of Operator TEXACO Inc.		
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 80240		
4. Location of Well UNIT LETTER B 660 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E N.M.P.M.		
15. Elevation (Show whether DF, RT, GR, etc.) 3982' (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 ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOBS ☐	
OTHER Repair Casing Leak ☒		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 rod & pump. Install BOP. Pull tbq.
2. Set RBP @ 3500'. Dump 2 sx. sand on top of plug.
3. Isolate leak.
4. Pump 2 Bbls. fresh water preflush. Pump 100 bbls. Howco Special Gelling Agent. Follow by squeezing leak w/200 sx Class 'C' cement w/2% Cacl. WOC.
5. Drill out cement and test.
6. Pull RBP. Clean out to TD.
7. Run 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. District Supt.** DATE **11-24-76**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: