State of New Mexico Form C-103 Submit 3 copies to Appropriate District Office Ainerals and Natural Resources Department Ener Revised 1-1-89 DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 30-025-03107 P.O. Box 2088 DISTRICT_II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease 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 E-7653 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 STATE AN (FORM C-101) FOR SUCH PROPOSALS.) OIL GAS 1. Type of Well: \boxtimes WELL WELL **OTHER** 8. Well No. 2. Name of Operator 7 **TEXACO EXPLORATION & PRODUCTION INC.** 9. Pool Name or Wildcat 3. Address of Operator 205 E. Bender, HOBBS, NM 88240 VACUUM ABO REEF 4. Well Location Feet From The SOUTH Line and 990 Feet From The EAST 2310 Unit Letter _ LEA COUNTY Township 18-S Range 35-E ___ NMPM _ Section 7 10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3961' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: REMEDIAL WORK ALTERING CASING PLUG AND ABANDON PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPERATION **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** CASING INTEGRITY TEST FOR TA EXTENSION \boxtimes OTHER: 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. INITIAL TEMPORARY ABANDONMENT TEST WAS COMPLETED ON THIS WELL ON 11/13/91. THE 5 1/2" CASING WAS TESTED TO 300# FROM SURFACE TO THE CIBP SET @ 8650'. NMOCD GAVE TEMPORARY ABANDONMENT STATUS THROUGH 11-21-96. THE FOLLOWING PROCEDURE IS TO RETEST THE CASING AND REQUEST AN EXTENSION OF THE TEMPORARY ABANDONMENT STATUS. 1. CIRCULATE HOLE W/ INHIBITED FLUID & TEST CASING FROM SURFACE TO CIBP SET @ 8650' AS PER NMOCD GUIDELINES TO 500# FOR 30 MINUTES. 2. IN CASE OF CASING INTEGRITY TEST FAILURE, PERFORM NECESSARY REPAIRS. 3. REQUEST TEMPORARILY ABANDON WELL STATUS EXTENSION.

Thereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Engr	Asst DATE <u>6/16/97</u>
TYPE OR PRINT NAME Monte C. Duncan	Telephone No. 397-0418
(This space for State Use)	91.6.4 1097
APPROVED BYTITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	DeSoto/Nichols 12-93 ver 1.0