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LAND OFFICE	
OPERATOR	

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-ENTER OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-

2. Name of Operator
TEXACO Inc.

3. Address of Operator
P.O. Box 728 Hobbs, New Mexico 88240

4. Location of Well
UNIT LETTER **J** **1650-1800** FEET FROM THE **South** LINE AND **1650** FEET FROM
THE **East** LINE, SECTION **6** TOWNSHIP **18-S** RANGE **35-E** N.M.P.M.

13. Elevation (Show whether DF, RT, GR, etc.)
3972' (GR)

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-1031

7. Unit Agreement Name
-

8. Form of Lease Name
N.M. 'AB' State

9. Well No.
5

10. Field and Pool, or Wildcat
A Vacuum Abo

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 ☐	OTHER ☒ Addl Cement	CASING TEST AND CEMENT JOBS ☐	

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 rods and pump. Install BOP. Pull tubing in Abo.
2. Set RBP's in Blinebry and ABO @ 7000'. Load w/water.
3. Log well to determine top of cement.
4. Perforate vent string w/4-JS above cement top.
5. Cement w/sufficient Class 'C' cement to tie back a minimum of 500' in 8-5/8" csg.
6. DOC, test, and pull RBP's.
7. Install pumping equipment. Test and return ABO to production.

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

SIGNED *Jack Schaff* TITLE Asst. Dist. Supt. DATE 10-6-78

Only Signed By
Jerry Beaton
APPROVED BY Dist. I. Supt. TITLE _____ DATE **OCT 10 1978**

CONDITIONS OF APPROVAL, IF ANY: