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NEW MEXICO OIL CONSERVATION COMMISSION

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

MAR 19 11 AM '67

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
State - B-1031

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator	NONE
3. Address of Operator	8. Farm or Lease Name
TEXACO Inc.	N. M. "AB" State
4. Location of Well	9. Well No.
UNIT LETTER J 1800 FEET FROM THE South LINE AND 1650 FEET FROM	5
THE East LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E NMPM.	10. Field and Pool, or Wildcat
	Vacuum Abo Reef
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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 1105.

We propose to do the following work on subject well:

1. Acidize existing perforations with 1500 gallons 15% CRA, followed with 50 BBLs lease crude.
2. Shut well in for 24 Hours, Swab well, recover load, Test, and return well to production.

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

SIGNED Dan Gillett TITLE Assistant District Superintendent DATE February 28, 1967

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: