Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT!

OIL CONSERVATION DIVISION

WELL API NO.

P.O. Box 1980, Hoods, NM 88240	P.O. Box 2088 RICT II Santa Fe, New Mexico 87504-2088 Drawer DD, Artesia, NM 88210		30-02	520171	İ
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of	of Lease STATE X	FEE 🗌
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Ga B-1258	s Lesse 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.)			7. Lease Name or Unit Agreement Name NEW MEXICO "AE" STATE		
i. Type of Well: Off. GA3 WELL X WELL.	OTHER				
2. Name of Operator			8. Well No.		
Texaco Exploration and Production Inc.			19		
3. Address of Operator P. O. Box 730 Hobbs, NM 88240			9. Pool name or Wildcat VACUUM ABO REEF		
P. O. Box 730 Hobbs, NN	88240		VACUUM AB	O REEF	
1	Feet From The NORTH	Line and	660 Feet From	The WEST	Line County
Section 11			NMPM LE	A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	10. Elevation (Show whether I 4021' DF				
	propriate Box to Indicate N	•	_		
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON F		REMEDIAL WORK		ALTERING CASING	3 🗆
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT X			
PULL OR ALTER CASING	ALTER CASING CASING TEST AND C				
OTHER:	□	OTHER:			
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	s (Clearly state all pertinent details, an	d give pertinent dates, inclu	ding estimated date of	of starting any propose.	d
1. NOTIFIED NMOCD. TOH W/ R	DDS & PMP, INSTALLED BOP	, TOH W/TBG. ST	ARTING DATE 8	3/24/93.	
2. SET CIBP @ 8560' & CAPPED W/ 35' CMT. RAN FREE POINT ON CSG, FREE POINT @ 2000'.					
3. CIRCD HLE W/ BRINE GEL, SE	ET CIBP @ 6000' & CAPPED	W/ 35' CMT.			
4. SET CIBP @ 4900' & CAPPED	W/ 35' CMT. PERFD CSG	@ 3270' & ATTEMP	TED TO EST CIF	RC, COULDN'T PL	IMP IN.
5. SET CIBP @ 3310' & CAPPED @ 2007', PULLED CSG TO 410		2007', CIRCD HLE	w/ Brine Gel,	, SPTD 90 SXS C	MT
6. SPTD 130 SXS CMT FR 410'	TO SURF, PULLED CSG.				
7. CUT OFF WELLHEAD & ANCHO	RS, INSTALLED DRY HOLE I	MARKER, CLEANED I	OCATION. COM	PLETION DATE 1	0/26/93.
I hereby certify that the information above is true an	d complete to the best of my knowledge and	belief.			
SIGNATURE TO THE CONTROL OF THE SIGNATURE	m	LE ENGINEER'S ASS	SISTANT	DATE 11-5-9	3
TYPE OR PRINT NAME MONTE C. DUNCA	N.			TELEPHONE NO. 3	93-7191
(This space for State Use)				□ JAN 34	(00 £.
	0.11	a. a. 20	CALCALICAL (# S MAL F	:33~