

NAME OF WELL REC'D BY	
DISTRIBUTION	
SANITARY	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

Form G-103
Supersedes G-101
G-101 and G-102
Issued 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS DO NOT USE THIS FORM FOR PRODUCTION WELLS. IT IS FOR USE ONLY FOR WELLS PRODUCING WATER OR OTHER LIQUID. IT IS NOT TO BE USED FOR WELLS PRODUCING GAS OR OTHER FLAMMABLE LIQUID.		1. State Type of Lease State ☒ Fee ☐ 2. State Oil & Gas Lease No. 9-1258-1
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 G 1980 SECTION 11 TOWNSHIP 18-S RANGE 34-E	5. Date of Report 6. State of Lease New Mexico "AE" State 7. Well No. 15 8. Field and Pool, if known Acour Arco Reef	
9. Elevation (Show whether D, RT, GR, etc.) 3995' GL	10. 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 DRILL ☐	PLUG AND ABANDONMENT ☐
FULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND IDENT. ☐	OTHER Casing String Identification ☒

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. Risers installed on all casing strings with valves above ground and labeled for future identification.

2. Inspected by N.E. Clegg

Casing strings:	Size	Set At	No. xms Cmt used
	11 3/4"	370'	350
	8 5/8"	3157'	1650

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

SIGNED 1 TITLE Assistant District Supt. DATE 3-25-76

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: