

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. B-1080-1

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 ☐ GAS WELL ☐ OTHER	7. Unit Agreement Name —
2. Name of Operator Texaco Inc.	8. Form or Lease Name New Mexico 'M' State
3. Address of Operator P.O. Box 728, Hobbs, New Mexico 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>D</u> <u>560</u> FEET FROM THE <u>North</u> LINE AND <u>760</u> FEET FROM THE <u>West</u> LINE, SECTION <u>1</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> NMPM.	10. Field and Pool, or Wildcat Vacuum Wolfcamp
15. Elevation (Show whether DF, RT, GR, etc.) 4010 (DF)	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 OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	

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. MIRU Pulling unit. Pull rods and pump. Install BOP. Pull tubing.
2. TIH with 2 1/4" bit. Clean out 2-7/8" casing to 10,000'. POH.
3. Load casing with water. Perforate Wolfcamp 4 SPI at 9337-38, 9343-45, 9347-49, 9770-73, 9793-9800' (20 intervals total). POH.
4. TIH with packer. Spot 170 gals 15% NEFE HCL across perforations at 9337-9960'. Set packer at 9200'.
5. Acidize Wolfcamp perforations at 9337-9960' with 4830 gals 15% NEFE HCL and 126 ball sealers.
6. Swab back load.
7. Pull packer. 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 Howard A. Smith for A. Gerhardt TITLE Area Superintendent DATE 2-24-87

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE

DATE

MAR 2 1987

CONDITIONS OF APPROVAL, IF ANY: