

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2082

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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

5a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. E-1022

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 Central Vacuum Unit
2. Name of Operator Texaco, Inc.	8. Farm or Lease Name Central Vacuum Unit
3. Address of Operator P. O. Box 700, Hobbs, New Mexico 88240	9. Well No. 117
4. Location of Well UNIT LETTER C, 600 FEET FROM THE South LINE AND 700 FEET FROM THE East LINE, SECTION 6 TOWNSHIP 10-S RANGE 25-E N.M.P.M.	10. Field and Pool, or Wildcat Vacuum Gray Unit San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 2000' (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 OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER Repair Water flow & Treat ☒	CASING TEST AND CEMENT JOB ☐	OTHER ☐

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 & pump. Install ROP. Pull tubing.
2. Set ROP @ 4000' & dump 20' sand or plug.
3. Perforate 2 1/2" csc w/2-15 @ 1530'. Set cement retainer @ 1530'.
4. Cement 7" x 2 1/2" csc Annulus w/225 sx. class 'II' cement. Circulate. Squeeze w/Addl. 200 sx. class 'II' cement. OC. Run temperature survey.
5. WOC. POC. Test Csc.
6. Set pkr. @ 4450'. Acidize w/6000 gals. 15% gelled HFFF Acid in 3-stages using 500# rock salt between stages.
7. Run production equipment. Test & return to production.

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

SIGNED [Signature] TITLE Asst. Dir. Sec. DATE 1/5/79

Orig. Signed By
Jerry Sexton
Dist. 1, Supr.

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: