O. COPIES RECEIVED		Form C-103
DITRIBUTION		Supersedes Old C-102 and C-103
IT V FE	N MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
<u> </u>		5a. Indicate Type of Lease
s.G.s.		State X Fre
LAND OFFICE		5, State Oil & Gas Lease No.
OPERATOR		
CUNDO	W NOTICES AND REDORTS ON WELLS	mmmm hrin i
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FOR PROPOSALS TO DRILL OR TO DEFEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)		
1.		7. Unit Agreement Name
OIL X GAS WELL	OTHER-	
2. Name of Operator		8. Farm or Lease Name
TEXACO INC	•	NM. "CR" State
3. Address of Operator	9901.0	9. Well No.
P.O. BOX 728, HOBBS, N	EW MEXICO 88240	3 10. Field and Pool, or Wildcat
4. Location of Well		
UNIT LETTER L	1980 FEET FROM THE South LINE AND 660 FEET F	ROM Lusk Strawn
THE West LINE, SECTION	.см. ////////////////////////////////////	
mmmm	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3543' DF	Lea
$\frac{1}{1}$:		
	Appropriate Box To Indicate Nature of Notice, Report or SUBSEQUE	ENT REPORT OF:
NOTICE OF IT	11 EN 110N 10:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	_
	OTHER	
OTHER		
	petations (Clearly state all pertinent details, and give pertinent dates, inclu	ding estimated date of starting any proposed
work) SEE RULE 1103.	perations (Citeurity State are periodem details, and give periation dates, incre	and commercial and of ordering only propression
REMARKS		
	2 (7 7 7 7	
	O (To Be Reconditioned-0il)	
3 REASON FOR ABANDON	MENT DATE - May, 1970 MENT - Not profitable to operate.	
7. 142,000 1010 1,22200	Not profitable to operate.	
h. FUTURE PLANS - Ir	nvestigate possibilities of recompleting in Lu	ek Dalawaya
	O Francisco of recompressing in Da	De lawaie
	DISCOURT OF THE CONTROL TO THE CONTROL OF THE CONTR	*
5. DATE OF FUTURE WO	RKOVER OR PLUGGING - June, 1975	
	1.0	-
	Ţ	1000
		9000 1/175
	- ,	gires 10/1/75
		. /
15. I hereby certify that the information	above is true and complete to the best of my knowledge and belief.	
SISNED THE STATE OF THE STATE O	Asst. Dist. Supt.	DATE 10-18-74
- J		
	Orlg. Signed by	DATE 3 4 13 14
APPROVED BY	Joe D. Ramey Tire	CATE 1
CONDITIONS OF APPROVAL, IF ANY	e: Dist. I, Supv.	