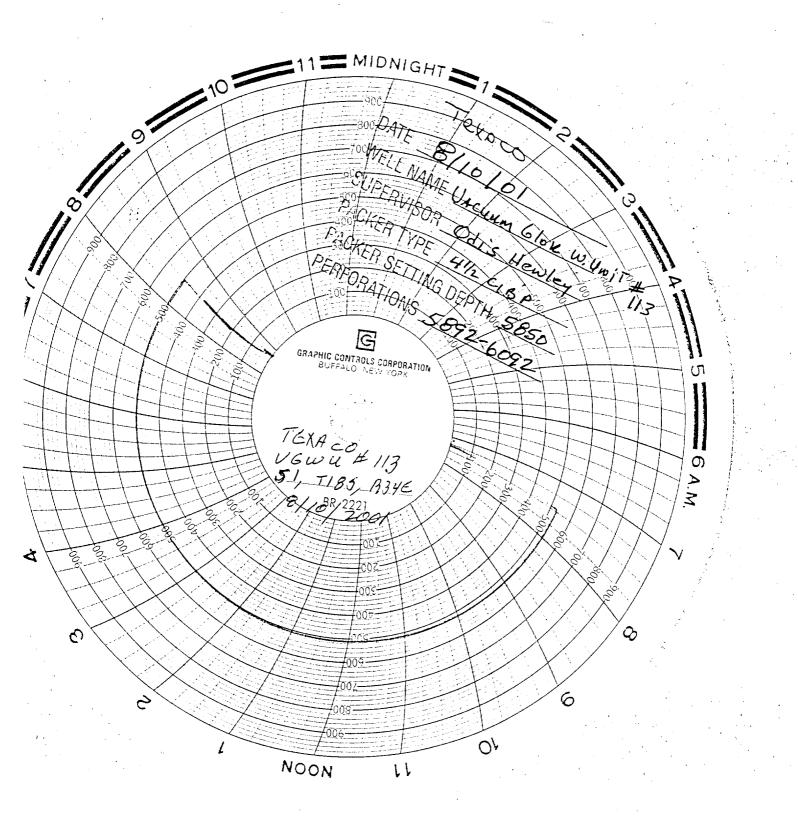
## State of New Mexico

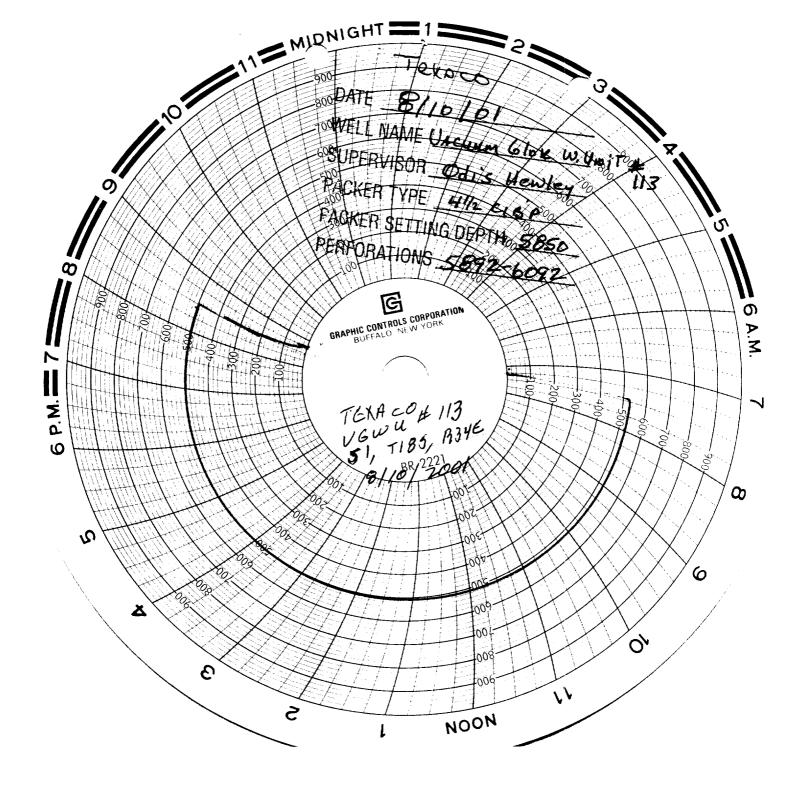
Form C-103

Submit 3 copies to Appropriate District Office	E	gy, Minerals and Nat	tural Res	ources Department			Revised 1-1-89	
DISTRICT I	OIL	CONSERVA	ATIO	N DIVISION	WELL API NO.			
P.O. Box 1980, Hobbs, NM	88240	P.O. Bo				30-025-21107		
DISTRICT II Santa Fe, New Mexico 87504-2088						5. Indicate Type of Lease		
P.O. Box Drawer DD, Artesia	, NM 88210	Canta i C, i Ci	,,oxioo			STATE 🗸	FEE	
DISTRICT III					6. State Oil / Gas			
1000 Rio Brazos Rd., Aztec.						B-1080-	1	
(DO NOT USE THIS FOR	IM FOR PROPOSAL: RENT RESERVOIR.	AND REPORTS ON S TO DRILL OR TO D USE "APPLICATION FOR SUCH PROPOSA	DEEPEN I FOR PE	OR PLUG BACK TO		or Unit Agreement Na RIETA WEST UNI		
1. Type of Well: OIL WELL	✓ GAS WELL	OTHER						
2. Name of Operator	TEYACO EXPLORAT	TION & PRODUCTION	N INC		8. Well No.	113		
					9. Pool Name or	Mildcat		
3. Address of Operator	PO BOX 3109, MIDL	AND, TX 79702			1	VACUUM GLORIETA	٩	
4. Well Location								
i .				Line and 1880			ine	
Section 1	Town	ship 18S	Ra	nge 34E N	MPM	LEA CO	UNTY	
	10. E	levation (Show whether D	F, RKB, R	(T,GR, etc.) 3995' G	L; 4007' KB			
11.	Check Appropr	iate Box to Indica	te Natu	re of Notice, Repo	rt, or Other Dat	а		
NOTICE OF L	INTENTION TO	):		S	SUBSEQUEN	T REPORT C	F:	
PERFORM REMEDIAL WOR		AND ABANDON		REMEDIAL WORK	<u>~</u>	ALTERING CASING		
		SE PLANS		COMMENCE DRILLING C	PERATION	PLUG AND ABANDO	NMENT	
TEMPORARILY ABANDON		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	= +	CASING TEST AND CEM	ENT IOR			
PULL OR ALTER CASING	.—				REQUEST T	O TA WELL	,	
OTHER:				OTHER:			. •	
12. Describe Proposed or C proposed work) SEE RL 8-07-01: MIRU. LD RDS. T 8-08-01: REMOVE WH BC 8-09-01: NUBOP. REL TAI 8-10-01: TIH W/CIBP & PI PSI-OK. CIRC CSG W/TRE 8-13-01: FILL HLE W/PKR	JLE 1103. FIH & CATCH FSH. L DLTS. C. TIH W/BIT & CSG KR. SET CIBP @ 585 EATED WTR. CHAR R FLUID. NDBOP. INS	UNSEAT PUMP.  SCRAPER & TBG TO  50'. ATTEMPT TO TES  T FOR 30 MINS-OK.	O 1556'. ST CIBP. CHART	NO SUCCESS. REL F				
FINAL REPORT								
				This Appr Abandonme	oval of Ten nt Expires	porary /	106	
						7	r	
	1						. " <del>**</del>	
hereby certify that the information above	is the and complete to the har	my knowledo and helief		· - · ·	<u> </u>			
CICNATUDE	JON 1805)	lake TITIF	Engin	eering Assistant		DATE 8/24	4/01	
SIGNATURE	, <del>2</del> 2.00	· ITTLE	"				915-688-4752	
TYPE OR PRINT NAME	J. Denis	se Leake						
(This space for State Use)						4		

APPROVED

BUNDITIONS OF APPROVAL, IF ANY:





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August rujaoo, wes,
Nacy Eneng 44

Hobbs OCD