

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

Form C-103  
Revised 10-1-73

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

5a. Indicate Type of Lease  
State ☒ Fee ☐  
5. State Oil & Gas Lease No.  
**B-1306**

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 - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name -
2. Name of Operator <b>TEXACO Inc.</b>	8. Farm or Lease Name <b>N.M. 'R' St. NCT-1</b>
3. Address of Operator <b>P. O. Box 728, Hobbs, New Mexico 88240</b>	9. Well No. <b>10</b>
4. Location of Well UNIT LETTER <b>B</b> <b>330</b> FEET FROM THE <b>North</b> LINE AND <b>2135</b> FEET FROM <b>East</b> LINE, SECTION <b>6</b> TOWNSHIP <b>18S</b> RANGE <b>35E</b> N.M.P.M.	10. Field and Pool, or Wildcat <b>Vacuum Glorieta</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>3964' (GR)</b>	12. County <b>Lea</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

REMEDIAL WORK ☐  
COMMENCE DRILLING OPERATIONS ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

OTHER **Repair Water Flow & Treat** ☒

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 BOP. Pull tubing.
2. Set RBP @ approx. 5500'. Load 2-7/8" csg w/water. Log Well.
3. Squeeze 10-3/4" - 2-7/8" csg. annulus w/775 sx. Class 'C' Cement. WOC. Run Temperature Survey.
4. Pull RBP. Set pkr @ 5950'. Acidize Glorieta perfs 5984-6125' w/6000 gals 20% NE-FE acid in 6 stages 300# rock salt & 150# Benzoic Acid Flakes after each stage. Flush w/2% KCL wtr.
5. Run production equipment. Test and return to production.

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

SIGNED  TITLE **Asst. District Supt.** DATE **3-28-80**

APPROVED BY Orig. Signed by Jerry Sexton TITLE Dist. Engr. DATE 3-28-80  
CONDITIONS OF APPROVAL, IF ANY.