## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	$\mathbf{I}_{-}$	
DISTRIBUTION		
BANTA PE		
FILE		
U.S.O.S.		
LAND OFFICE		
OPERATOR	T	

ONDITIONS OF APPROVAL, IF ANYI

## OIL CONSERVATION DIVISION

DISTRIBUTIO	N .		P. O. BOX 2				Form C-103 Revised 10-1
FILE		SANTA	FE, NEW MI	EXICO B750	01	to ledicale Tue	/ 1
U.1.0.1.						State X	Foo [
LAND OFFICE						5, State Ot) & C	
OPERATOR						B-1258-1	
·	SUNDRY NOT	TICES AND REP	OPTS ON WE	115		minn	THIIII.
(DO NOT USE TH	SUIVER   INCHES   19 FORM FOR PROPOSALS   19 FOR PROPOSALS   19 FOR POPULATION FOR	TO DRILL OR TO DEEP	IN DR PLUG BALK	TO A DIFFERENT P	EBERVOIR.		
•						7. Unii Agreem Vacuum G San Andr	int Name ravburg
tic X	WELL DIN	En-					
Name of Operator						e. Vacuum G	re Hame rayburg
	XACO Inc.					San Andr	<u>es Unit</u>
Address of Operator	0 Dec 700 III	-bb- 21 Man	990h.c	`		y, well 140.	
	0. Box 728, Ho	obbs, New Mex	100 00240	) 		10 Field and F	Pool, or Wildcat
Location of Well	330		East	3	30	Vacuum G San Andr	reyburg
UNIT LETTER		FEET FROM THE _		LINE AND	FEET FROM	Tilling	mmnii
North		וו	18-s		34-E		
THE	LINE, BECTION	TOWNSH	· ———	RANGE	NMPM.		
mmm	THITTITITI	15. Elevation (S.	low whether DF,	RT, GR, etc.)		12. County	
		$\aleph$	400	7' (DF)		Lea	
7777777777	Check Approx	priate Box To I	ndicate Natu	re of Notice	Report or Oth	er Data	
N	OTICE OF INTENT	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		SUBSEQUENT		₹:
			ţ				
ERFORM REMEDIAL WOR	• 🗆	PLUG AND A	AND ON	MEDIAL WORK		ALTI	ERING CABING
EMPORABILY ABANDON			(	SMMENCE DRILLING	OPHS.	PLUG	AND ABANDONMENT
ULL DR ALTER CABING		CHANGE PLA	ns 🔲 64	SING TEST AND E	EMENT JOB		
, ADDI	DEDEC IN CAME	70NF	<b></b>	OTHER	<del> </del>		·
OTHER ADDL	PERFS IN SAME	ZUNE	입				
1. 2. 3. 4.	RIG UP. PU CLEAN OUT S PERFORATE 4713-4731'. SET PKR ABO W/6000 GAL ROCK SALT BBLS WATER. INSTALL PRO	4 1/2" CA WE PERFORA S 20% NEF AND 200#	TD). SING W/2 TIONS. E GELLED MOTH BAL	-JSPF FR ACIDIZE I ACID I LS BETWE	PERFORATION N 3-STAGE EN STAGES.	697 AND : IS 4459-4 S USING : FLUSH 1	731' 200# W/25
. I hereby certify the	the information above	is true and complete				DATE9	-19-84
SHED	#/						
00(0)(4)	Marian Salah Baran B Baran Baran Ba	<b>15</b> .				SE	P 2 1 1 2
OKIDIN.	hereby certify that the information above is true and complete to the best of my knowledge and belief.  THE ASST. Dist. Mgr.  ORIGINAL MGR.		DATE	e e tilg etg			