| STATE OF NEW MEXICO | | | |
|---|---|---|--|
| ENERGY AND MINERALS DEPARTMEN | | TION DIVISION | |
| we, or constantings | OIL CONSERVA | | Form C-103 |
| DISTRIBUTION | Р. О, ВО) | | Revised 10-1-78 |
| BANTA FE | SANTA FE, NEW | MEXICO 87501 | |
| FILE U.S.G.S. | - - | | 5a. Indicate Type of Leuse |
| LAND OFFICE | | | State X Foo |
| OPERATOR | | | 5. State Oll 6 Gas Lease No. E-6002 |
| | | | E-0002 |
| SUNDRY NOTICES AND REPORTS ON WELLS IDO NOT USE THIS FORM FOR PROPOSALS TO PRILL OR TO DEEPEN OF PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) | | | |
| 1. | | | 7. Unit Agreement Name |
| WELL XX WELL | OTHER- | | Central Vacuum Unit |
| 2. Name of Operator | | | Central Vacuum Unit |
| Texaco Inc. | • | | 9. Well No. |
| • • • • | | 00 alka | 131 |
| P. O. Box 728, Hobbs, New Mexico 88240 | | | Vacuum Grayburg- |
| | 9 FELT FROM THE North | LINE AND 918 | |
| UNIT LETTER, CLL | | | |
| THE WEST LINE, SECTIO | TOWNSHIP 18-S | RANGE 35-E NMP | • ()))))))))))))))))))))))))))))))))))) |
| | 15. Elevation (Show whether | DF, RT, GR, etc.) | 12. County |
| 1///////////////////////////////////// | | Lea | |
| 16. Check A NOTICE OF IN | Appropriate Box To Indicate N ITENTION TO: | | ther Data NT REPORT OF: |
| | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANGON | | COMMENCE DRILLING OPHS. | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | CHANGE PLANS | CASING TEST AND CEMENT JOB | |
| | i | OTHER CONVERT TO | water injection xx |
| OTHER | [] | | |
| 17. Describe Proposed or Completed Op work) SEE RULE 1103. | erations (Clearly state all pertinent det | ails, and give pertinent dates, includi | ng estimated date of starting any proposed |
| 1. Rigged up. | Pull rods & pump. | Install BOP. Pull | Tubing. |
| | | | |
| 2. Clean out t | o 4740' (PBTD) | | |
| | OD plastic coated tu nhibited water. | bing w/pkr. & set @ | 4300'. Load |

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4. Convert to Water Injection, 1-17-79.

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

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| LICALD UHAFA | mut Asst. Dist. Supt. | DATE 2-23-79 |
|---|-----------------------|--------------|
| Orig. Signed by APPROVED BY John Provents CONDITIONS OF APPROVAL, IF ANY: | τ τιζ | FEB 27 1979 |