

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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

5a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. B-1258-1
7. Unit Agreement Name ---
8. Firm or Lease Name New Mexico "AE" State
9. Well No. 24
10. Field and Pool, or adjacent Vacuum Abo Reef
12. County Lea

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

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator

Texaco Inc.

Address of Operator

P.O.Box 728, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER H 1850 FEET FROM THE North LINE AND 550 FEET FROM
THE East LINE, SECTION 11 TOWNSHIP 18-S RANGE 34-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3996' (GR)

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 ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER Repair water flow ☒

7. 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. Rigged up. Pull Reda Pump.
2. Set RBP @ 4800'. Spot 20' sand on plug.
3. Perforate 5 1/2" csg w/2-JS @ 1835'.
4. Set cement retainer @ 1735'. Cemented csg perfs @ 1835' w/400 sx class H cement containing 2% CaCl. Cement circulated. WOC.DOC.
5. Tested 5 1/2" csg to 600# for 30 minutes 3:00-3:30 PM, 11-16-81. Tested OK.
6. Pull RBP. Install submersible pump.
7. Test & return to production. 12-14-81.

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

SIGNED [Signature]

TITLE Asst. Dist. Mgr.

DATE 12-21-81

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: