

L 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.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-1306-1

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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection Well	7. Unit Agreement Name Vacuum Grayburg San Andres Unit
2. Name of Operator Texaco Inc.	8. Farm or Lease Name
3. Address of Operator P. O. Box 728, Hobbs, NM	9. Well No. 34
4. Location of Well UNIT LETTER J 2630 FEET FROM THE South LINE AND 2630 FEET FROM THE East LINE, SECTION 1 TOWNSHIP 18S RANGE 34E NMPM.	10. Field and Pool, or Wildcat Vacuum Grayburg San Andres Unit
15. Elevation (Show whether DF, RT, GR, etc.) 4001' GR	12. County Lea

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

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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. Install BOP, pull packer and 2 3/8" tubing.
- 2) Cleanout to 4299 with 4 3/4" bit.
- 3) Perforated 5 1/2 casing w/l JSPF from 4242-4312 (71')
- 4) Acidized perms w/8000 gals of 15% NEFE in 3 stages with 2000# rocksalt between stages. Max press. 2200 psi, min 1400 psi, AIR 4 BPM, ISIP 1700.
- 5) TIH w/5 1/2 brown pkr to 4158', load backside, set pkr and test to 500#. Return to inj. Rate 1100 BPD @ 825 psi.

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

SIGNED J. W. Browning TITLE Dist. Administrative Supr. DATE 03/10/86

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR

TITLE _____

DATE MAR 21 1986

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAR 19 1986
O.C.D.
HOBBS OFFICE