NO. OF COPIES RECEIVED				
DISTRIBUTION	<u> </u>			Form C-103 Supersedes Old
SANTAFE	NEWA	MEXICO OIL CONSERVATIO	N COMMENON	C-102 and C-103
FILE	""	MEXICO OIL CONSERVATIO	IN COMMISSION	Effective 1-1-65
U.S.G.S.				5a. Indicate Type of Lease
LAND OFFICE				State Fee
OPERATOR				5. State Oil X Gas Lease No.
(DO NOT USE THIS FORM FO USE "APPH	NDRY NOTICES AN R PROPOSALS TO DRILL OR LICATION FOR PERMIT —"	D REPORTS ON WELLS TO DEEPEN OR PLUG BACK TO A D (FORM C-101) FOR SUCH PROPOSAL	IFFERENT RESERVOIR. S.)	7. Unit Agreement Name
well well well. 2. Name of Operator	OTHER-			Vacuum Graybung
X				8. F San Andres Unit
	Wacillim Gnorthung			
3. AddreTEXACO Inc.				Yacuum Grayburg ^{9. w} San Andres Unit
4. Locator of O'ell Box 728				9. Wan Andres Unit
4. Locator of Cell Box 728	2630	OM THE LINE AN	2 630	10. Fi est and Pool, or Wildcat
4. Locaton of Vell Box 728 unit letter the East	2630 FEET FRO	South TOWNSHIP RAN	2630 ™———™	10. Fi est and Pool, or Wildcat
4. Locator of Vell Box 728 UNIT LETTER	2630 FEET FRO	South	2630 ™———™	10. Figured Pool, or Wildcat
4. Locator of Vell Box 728 UNIT LETTER	2630 SECTION 15, Elev ck Appropriate Box	South TOWNSHIP RAN	2630 SEN R, etc.)	10. Fied and Pool, or Wildcat FROM San Who es the second of the second
4. Locaton of Vell Box 728 UNIT LETTER	2630 FEET FRO	South Township	2630 R, etc.) Notice, Report or	10. Fied and Pool, or Wildcat FROM San Who es the second of the second
4. Locaton of Vell Box 728 UNIT LETTER	2630 15, Elev ck Appropriate Bos F INTENTION TO:	South Township	2630 R, etc.) Notice, Report or SUBSEQUE	10. Fiedand Pool, or Wildcat FROM 12. County Other Date Other Date 10. Fiedand Pool, or Wildcat
4. Locaton of Vell Box 728 UNIT LETTER THE East 16. Che NOTICE O	2630 SECTION 15, Elev ck Appropriate Box F INTENTION TO:	South Township	2630 R, etc.) Notice, Report or SUBSEQUE	10. Fiedand Pool, or Wildcat FROM 12. County Other DateB ENT REPORT OF:

Please Change the lease Name & Well No. from New Mexico 'R' State NCT-3 Well No. 17 to Vacuum Grayburg San Andres Unit Well No. 34.

18. I hereby certify that the inf	formation above is true and co	emplete to the best of my knowledge and	d belief.	
SIGNED 1	1/4/	TITLE	DATE_	
	ned by	Asst. Dist.	. Supt,	1-11-73
APPROVED BY	Dish I, Supp	TITLE	DATE_	Unit 17 13/2
CONDITIONS OF APPROVAL.				* *