STATE OF NEW MEXICO

| NERGY AND MINERALS DEP. | | | | | | |
|--|--------------------------|-------------------------|---|---------------|---------------------|---|
| | | LCONSERV | ATION DIVISION | | • | Farm C 103 |
| DISTRIBUTION P. O. BOX 2088 | | | | | | Farm C-103 - Revised 10-1-7 |
| SANTA PE | 9 | SANTA FE, NE | W MEXICO 87501 | | | |
| FILE | | | | | 5a. Indicate Type | of Lease |
| U.S.O.S. | | | | | State X | Fee [|
| LAND OFFICE | | | | | 5. State Oil & Gas | Lesse No. |
| OPERATOR | | | | | 1 | |
| | | | | | B-3011-1 | mmm |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DIRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) | | | | | | |
| | | <u></u> | | | Vacuum Gt | avburg |
| well well other Water Injection | | | | | San Andres Unit | |
| Name of Operator | | | | | Vacuum Grayburg | |
| | | | | | | |
| Texaco Inc. | | | | | San Andres Unit | |
| Address of Operator | | | | | 1 | |
| P.O.Box 728, Hobbs, New Mexico 88240 | | | | | 29 | |
| Location of Well | | | | | Vectum Grayburg | |
| UNIT LETTER E 2630 PEET FROM THE NORTH LINE AND 1310 PEET PR | | | | FEET FROM | San Andre | 8 |
| UNIT LETTER | _, | THOM THE EVEL SEE | | | | |
| Wost | 2 | 18. | -S RANGE 34-E | NMPM. | | |
| THE West LINE | , SECTION C | TOWNSHIP | HANGE JT-13 | нмрм. | | |
| 15. Elevation (Show whether DF, RT, GR, etc.) | | | | | 12. County | 744444 |
| | | | | | · _ | /////////////////////////////////////// |
| | | 4024' (DI | <u>r) </u> | | Lea | <u> </u> |
| | beck Appropriate | Box To Indicate | Nature of Notice, Ret | ort or Oth | er Data | |
| Check Appropriate Box To Indicate Nature of Notice, Report or Oth NOTICE OF INTENTION TO: SUBSEQUENT | | | | | REPORT OF: | |
| NOTICE | OF INTENTION IN | J. | | 302432 | ,,_, | |
| ۲ | | Γ- | ٦ l | | ALVENI | NG : ASING |
| AFORM REMEDIAL WORK | | PLUG AND ABANDON | REMEDIAL WORK | 님 | | ≒ |
| MPDRARILY ABANDON | | | COMMENCE DRILLING OPHS. | 7 | PLUG AN | ID APANDONMENT (|
| ILL OR ALTER CASING | | CHANGE PLANS | CASING TEST AND CEMENT | | | ro- |
| | | _ | OTHER Cancell | C-103 | | <u>X</u> |
| 0745 | | [| | | | |
| V/44.7 | | | | | | |
| Describe Proposed or Comp | leted Operations (Clear) | y state all pertinent d | etails, and give pertinent dat | es, including | estimated date of s | tarting any propose |
| work) SEE RULE 1103. | • | | | | | |
| | | | | | | |
| | | | | | | , |
| | | _ | | | | |
| Please cand | cell C-103, ε | approved 8-2 | 21-78. Work wil: | l not b | e done at | the |
| present tir | ne. | | | | | |
| F | - | | | | | |
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18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 12-11-81 Asst. Dist.Mgr. Orig: Signed by Jerry Sexton CONDITIONS OF APPROVAL, IF ANY