

NEW MEXICO OIL CONSERVATION COMMISSION

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FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease State ☒ Fee ☐
5. State Oil & Gas Lease No. B-1080-1
7. Unit Agreement Name Vacuum Grayburg San Andres Unit
8. Farm or Lease Name Vacuum Grayburg San Andres Unit
9. Well No. 49
10. Field and Pool, or Wildcat Vacuum Grayburg San Andres Unit
12. County Lea

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR APPLICATION TO DRILL OR TO CEMENT OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO DRILL C-101 FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER- Water Injection Well
2. Name of Operator TEXACO Inc.
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER F 1390 FEET FROM THE North LINE AND 2580 FEET FROM THE West LINE, SECTION 1 TOWNSHIP 18-S RANGE 34-E N.M.P.M.
15. Elevation (Show whether DF, RT, GR, etc.) 3991' (GR)

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

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHARGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☒ Test for channel behind casing	CASING TEST AND CEMENT JOBS ☐	

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 1703.

1. Rig up. Install BOP. Pull tubing and packer.
2. Set cement retainer @ 4175'.
3. Perforate 4-1/2" casing w/2 JSPF from 4065-4067'.
4. Set packer @ 4040'. Acidize perforations 4065-4067' w/150 gals. 15% HCL.
5. Swab for fluid entry.
6. Return well to injection. Pressure up to 900# and monitor csg pressure.
7. If channel indicated, fill 4-1/2" csg w/sand to 4380'. Squeeze w/100 sx Class 'C' cement.
8. Perforate 4-1/2" csg @ 1500'. Check for water flow. Set cement retainer @ 1475'.
9. Squeeze w/500 sx. Class 'C' cement.
10. Drill out cement and test w/600#. Clean out to TD.
11. Return to injection.

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

SIGNED *C. J. Smith* TITLE **Asst. District Supt.** DATE **11-24-76**

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

NOV 3 1976

OIL CONSERVATION COM. 111
HOBBS, N. M.