

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 3002524330
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-1306-1
7. Lease Name or Unit Agreement Name Vacuum Grayburg San Andres Unit
8. Well No. 32
9. Pool name or Wildcat Vacuum Grayburg San Andres

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. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Injection	
2. Name of Operator Texaco Producing Inc.	
3. Address of Operator P.O. Box 730, Hobbs, NM 88240	
4. Well Location Unit Letter L : 30 Feet From The West Line and 2630 Feet From The South Line Section 1 Township 18-S Range 34-E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3999' GR	

11. 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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: ☐	

12. 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.

09-18-90 thru 09-26-90

- MIRU PU. Backflow well. NU BOP. TOH w/inj pkr.
- TIH w/bit on WS. C/O to 4789' PBDT.
- Spt 450 gals 4% NA Perborate across perfs 4333-4750'. Backflow.
- Perforate 5-1/2" csg w/2 JSPF 4403,13,27,47,55,68,77,87,94,98,4519,26,62,71,88,4627,37,43,55,84,4764,75,4781'. 23 Intervals/46 Holes.
- TIH w/TP & trtg pkr. Spt control valve to 4789'.
- Spt 450 gals 15% HCL NEFE w/30 gals checkersol, 450 gals 4% NA Perborate, 450 gals 15% HCL NEFE w/25 gals checkersol. Pld up hole 550'. PSA 3652'. Treated w/6100 gals 15% HCL NEFE and 2000# RS. Max P-2800#. Min P-1600#.
- Returned to Injection.

Prior - 407 BWPD @ 1200 psi After - 381 BWPD @ 1200 psi

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

SIGNATURE Richard DeSoto TITLE Engineering Technician DATE 10-26-90

TYPE OR PRINT NAME R. B. DeSoto TELEPHONE NO. 393-7191

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: