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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name Vacuum Grayburg San Andres Unit
2. Name of Operator TEXACO Inc.		8. Farm or Lease Name Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240		9. Well No. 32
4. Location of Well 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.		10. Field and Pool or Wildcat Vacuum Grayburg San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3999' GR		12. County Lea

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

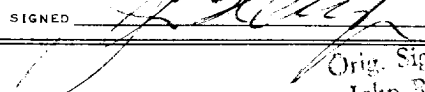
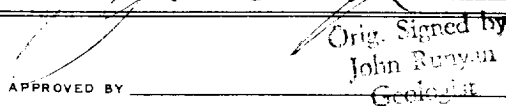
SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Change Lease Name & Well No.

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.

Please Change the Lease Name & Well No. from New Mexico 'R'
State NCT-3 Well No. 18 to Vacuum Grayburg San Andres Unit Well No.
32.

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

SIGNED 	TITLE Asst. Dist. Supt.	DATE 1-26-73
APPROVED BY  Orig. Signed by John Runyon Geologist	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		