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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 ☒ Fee ☐

5. State Oil & Gas Lease No.

B-3011-1

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
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 45
4. Location of Well UNIT LETTER C 1310 FEET FROM THE North LINE AND 2530 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 18-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat Vacuum Grayburg San Andres Unit
15. Elevation (Show whether DF, RT, GR, etc.) 4016' GR	12. County Lea

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PLUG OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☒
CASING TEST AND CEMENT JOB ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER ☐

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.

TD 356' Spudded 12 1/4" Hole 3-24-73

Ran 346' (9 Joints) 8 5/8" 20# casing set @ 356'.

Cemented w/ 300 sx. Class 'C' w/ 2% CaCl.

Cement Circulated. Job Completed @ 6:45 PM 3-24-73.

Tested 8 5/8" casing w/ 600# from 9:00-9:30 AM 3-25-73.

Tested OK. Drilled out plug & tested w/ 600# from 12:30-1:00 PM 3-25-73. Tested OK.

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 **3-27-73**

APPROVED BY 

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____