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LAND OFFICE		
OPERATOR		

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-1258-1	

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
2. Name of Operator TEXACO Inc.		8. Farm or Lease Name New Mexico AE State
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico 88240		9. Well No. 25
4. Location of Well UNIT LETTER <u>B</u> <u>990</u> FEET FROM THE <u>North</u> LINE AND <u>1780</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> N.M.P.M.		10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 4012' DF		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 JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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.

Total Depth 9050'
8-5/8" OD Casing Set @ 1760'

1. Ran 9039' (226 jts) 5-1/2" OD 17# N-80 & K-55 csg and set @ 9050'.
2. Cement csg w/1200 sx. TLW followed w/200 sx. Class 'C' Cement w/10# salt/sx. Job complete 7:00 P.M., 10-22-75.
3. Tested 5-1/2" OD csg w/2100# for 30 minutes 8:00 A.M. - 8:30 A.M., 10-23-75. Tested O.K.
4. Plug Back TD 9010'.

MIN. WDC 18#X15

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

SIGNED [Signature] TITLE Asst. District Supt. DATE 10-29-75

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: