

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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. 3002525712
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1306
7. Lease Name or Unit Agreement Name Central Vacuum Unit
8. Well No. 101
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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injection	
2. Name of Operator Producing Texaco Inc.	
3. Address of Operator P.O. Box 730, Hobbs, NM 88240	
4. Well Location Unit Letter G : 1410 Feet From The North Line and 1336 Feet From The East Line Section 6 Township 18S Range 35E NMMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3976' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

- 1) RU Nowcam 12/13/89.
- 2) TIH w/coiled tbg to 4760'. Cir cln. Spot 300 gals 4% NA Perborate across 4-1/2" perfs 4366-4764'. Sqzd out addl 100 gals.
- 3) Spot 300 gals 20% HCl w/5% checkersol. Sqzd out 1200 gals 20% HCl containing 23,000 SCF N₂.
- 4) P/27,000 SCF N₂ to clean up well. TOH.

Injection Prior 218 BWPD @ 985 psi
Injection After 304 BWPD @ 985 psi

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

SIGNATURE J. A. Head TITLE Area Manager DATE 01/17/90

TYPE OR PRINT NAME J. A. Head

TELEPHONE NO. (505) 393-7191

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JAN 25 1990