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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 [x] Fee [ ]

5. State Oil & Gas Lease No.: B-1113-1

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 [ ] GAS WELL [ ] OTHER- Water Injection

7. Unit Agreement Name: Central Vacuum Unit

2. Name of Operator: TEXACO Inc.

8. Farm or Lease Name: Central Vacuum Unit

3. Address of Operator: P.O. Box 728 Hobbs, New Mexico 88240

9. Well No.: 106

4. Location of Well: UNIT LETTER E, 2520 FEET FROM THE North LINE AND 1040 FEET FROM THE West LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E NMPM.

10. Field and Pool, or Wildcat: Vacuum Grayburg San Andres

15. Elevation (Show whether DF, RT, GR, etc.): 3972' (GR)

12. County: Lea

16. 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 [ ]		COMMENCE DRILLING OPNS. [x]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		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.

SPUD 17-1/2" Hole 4:30 PM 4-24-78
Total Depth 350'

1. Ran 338' (8 jts.) 13-3/8" OD 48# H-40 Csg & set @ 350'.
2. Cemented w/400 sx Class 'C' cement. Cement circulated. Job complete 4:30 AM 4-25-78. WOC 18 hrs.
3. Tested 13-3/8" OD csg w/1000# for 30 minutes, 10:30-11:00 PM, 4-25-78. Tested OK. Job complete 11:00 PM, 4-25-78.

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

SIGNED [signature] TITLE Asst. Dist. Supt. DATE 4-27-78

APPROVED BY _____ TITLE _____ DATE MAY

CONDITIONS OF APPROVAL, IF ANY: