STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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BANTA FE		
FILE		
U.S.O.S.		
LAND OFFICE		
OPERATOR	1	

OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-103
Revised 10-1-78

SANTA FE	SANTA FE, NEW MEXICO 87501	KES13EQ 13-1-70
V.S.O.S.		5a. Indicate Type of Leave
LAND OFFICE		State X Fee 5. State Oil & Gas Lease No.
OPERATOR		B-1306
SUNDRY NOTIC	ES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DUSE "APPLICATION FOR PERI	CHILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIS MIT _'' (FORM C-101) FOR SUCH PROPOSALS.)	7. Unit Agreement Name
OIL GAB OTHER-	Wa te r Injection	Central Vacuum Unit
2. Name of Operator		8. Farm or Lease Name Central Vacuum Unit
TEXACO Inc. 3. Address of Operator		9. Well No.
P.O. Box 728 - Hobbs, New Mexi	ico 88240	108
4. Location of Well	New+b 1400	Vacuum Grayburg- San Andre
UNIT LETTER 6 2630	FEET FROM THE North LINE AND 1480	San Andre
THE East LINE, SECTION 6	TOWNSHIP 18-S RANGE 35-E	
	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	3977' (GR)	Lea
Check Appropria	ate Box To Indicate Nature of Notice, Repo	ort of Other Data SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JO	.a. X
OTHER	OTHER	
To Day of a Completed Operations (C	Clearly state all pertinent details, and give pertinent dates	s, including estimated date of starting any proposed
wprk) SEE RULE 1103.	Spud 17-1/2" hole @ 5:00 P.M Total Depth 355'	
	·	
1. Ran 343' (8 jts) 13-3/8" (OD 48# K-55 csg & set @ 355'. 'C' cement. Cement circulated. Jo	h complete 1:30 A.M., 5-26-79.
WOC 18 Hrs.		
3. Tested 13-3/8" csg w/600#	for 30 minutes, 7:30-8:00 P.M. 5-2	6-79. Tested O.K. Job
complete 8:00 P.M. 5-26-7	9.	
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		7
18.1 hereby certify that the information above is tr	rue and complete to the best of my knowledge and belief.	
DIENED WL Const	Asst. Dist. Supt.	DATE 6-4-79
Orig. Signa		
Terry Sext	to n	DATE STORY
CONDITIONS OF APPROVAL, IF ANYI	iba. Airre	DATE 1177 - 11 T
CONDITIONS OF APPROVAL, IF ANY		