

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. 3002525798
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-1113-1
7. Lease Name or Unit Agreement Name Central Vacuum Unit
8. Well No. 113
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 ☐ GAS WELL ☐ OTHER Water Injection	
2. Name of Operator EXPL + Prod. Texaco Producing Inc.	
3. Address of Operator P.O. Box 730, Hobbs, NM 88240	
4. Well Location Unit Letter L : 1620 Feet From The South Line and 1100 Feet From The West Line Section 6 Township 18-S Range 35-E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3983' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☒
PLUG AND ABANDON ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER: ☐	OTHER: ☐

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.
04/29/91 thru 05/13/91

- 1) MIRU PU. TOH w/inj equip. TIH w/bit. C/O to 4729' PBD. TOH w/bit.
- 2) Perf 4.5 csg w/2 JSPI @ 4350,63,74,85,89,98,4405,13,17,22,92,4552,60,75,81,87,90,94,4606,10,19,26,31'. (23 Int/46 Hles)
- 3) TIH w/TP & pkr. Spt 250 gals 4% NA Perborate. PSA 3825'.
- 4) Acidize perfs 4350-4656' w/6000 gals 15% NEFE, 2500# RS & 75 BS's. Max P-2800#. Min P-2000#. AIR 4 BPM. ISIP-1580#. 15 Min-1400#. Swab ld. TOH w/WS.
- 5) TIH w/inj equip & returned to prod.

Prior - 2 BWP @ 990 psi After - 17 BWP @ 1000 psi

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

SIGNATURE Richard DeSoto TITLE Engineering Technician DATE 06/20/91
TYPE OR PRINT NAME R. B. DeSoto TELEPHONE NO. 393-7191

(This space for State Use)

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

