

STATE OF NEW MEXICO
AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☒ 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.)

ILL ☐ GAS ☐ OTHER- **Water Injection**
Name of Operator
EXACO Inc.
Address of Operator
P.O. Box 720 - Hobbs, New Mexico 88240
Location of Well
UNIT LETTER **L** **1620** FEET FROM THE **South** LINE AND **1100** FEET FROM
THE **West** LINE, SECTION **6** TOWNSHIP **18-S** RANGE **35-E** N.M.P.M.

7. Unit Agreement Name
Central Vacuum Unit
8. Farm or Lease Name
Central Vacuum Unit
9. Well No.
113
10. Field and Pool, or Wildcat
Vacuum Grayburg-San Andres

15. Elevation (Show whether DF, RT, GR, etc.)
3983' (GR)

12. County
Lea

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING CPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" 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.

**Spud 17-1/2" Hole @ 12:00 Midnight, 7-7-79
Total Depth 355'**

1. Ran 343' (8 jts) 13-3/8" OD 48# K-55 csg & set @ 355'.
2. Cement w/500 sx Class 'C' cement. Cement circulated. Job complete 3:35 PM, 7-7-79.
JOC 18 Hrs.
3. Tested 13-3/8" csg w/600# for 30 minutes, 9:45-10:15 AM, 7-8-79. Tested O.K. Job complete 10:15 AM, 7-8-79.

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 7-9-79
Original signed by
APPROVED BY Jerry [Signature] TITLE DATE
Dist. I, Supt.
CONDITIONS OF APPROVAL, IF ANY: