

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

N MEXICO OIL CONSERVATION COMMISSIC

Supersedes Old
C-102 and C-103
Effective 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR REEQUIP A DIFFERENT RESERVOIR.
(SEE APPLICATION FOR PERMIT - C-101, FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER: Water Injection

2. Name of Operator
TEXACO Inc.

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

4. Location of Well
UNIT LETTER K 1460 FEET FROM THE South LINE AND 2100 FEET FROM
THE West LINE, SECTION 6 TOWNSHIP 18-S RANGE 35-E NMPM.

5. Elevation (Show whether DF, RT, GR, etc.)
3980' (GR)

5a. Indicate Type of Lease
State ☒ Fee ☐

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

7. Unit Agreement Name
Central Vacuum Unit

6. Form of Lease Name
Central Vacuum Unit

9. Well No.
114

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

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 ☐	CHANGE PLANS ☒	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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.

TEXACO Inc. Submits to following revised casing program + Drilling procedure:

1. Set 13³/₈" OD 48# H-40 Casing in 17¹/₂" hole @ 350'. Cement to surface.
2. Set 9⁵/₈" OD 36# K-55 Casing in 12¹/₄" hole @ 1550'. Cement to surface.
3. Drill 8³/₄" hole through salt section to depth of 2700'.
4. If water-flow is encountered in salt section, run 4¹/₂" tubing to 1550' & flow salt water to Central Vacuum Unit Water injection system.
5. Following depletion of water-flow in salt section, drill 7⁷/₈" hole to TD of 4800'.
6. Set 4¹/₂" OD 10.5# K-55 Casing @ 4800'. Cement to surface.
7. Complete as Water Injection Well.

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

ICNTR. J. Schaff TITLE Asst. Dist. Supt DATE 4-5-78

ORIG. SIGNED BY
Jerry Sexton
Dist. 1, Supv.

REMOVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: