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LAND OFFICE	
OPERATOR	

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 ☒ Fee ☐
5. State Oil & Gas Lease No.
B-1031

SUNDRY NOTICES AND REPORTS ON WELLS DO NOT USE THIS FORM FOR APPLICATIONS TO DRILL OR TO REOPEN OR PLUG WELLS TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO DRILL" (FORM 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 **J** **1600** FEET FROM THE **South** LINE AND **1500** FEET FROM
THE **East** LINE, SECTION **6** TOWNSHIP **18-S** RANGE **35-E** NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
3971' (GR)

7. Unit Agreement Name
Central Vacuum Unit
8. Farm or Lease Name
Central Vacuum Unit
9. Well No.
115
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 OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOBS ☐	
OTHER Request extension of C-101 ☒		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.

TEXACO Inc. respectfully requests that Application for Permit to Drill, C-101, originally approved by NMOCC 1-18-78, on subject well, be extended. TEXACO will drill the well in the future but the exact date is uncertain. It is therefore requested that TEXACO be granted an indefinite extension.

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

SIGNED TITLE **Asst. Dist. Supt.** DATE **7-20-78**
APPROVED BY TITLE **Dist. I. Supt.** DATE **JUL 24 1978**
CONDITIONS OF APPROVAL, IF ANY: