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U.S.G.S.	
LAND OFFICE	
OPERATOR	

9a. Indicate Type of Lease
State Fee
8. State Oil & Gas Lease No.
8-1031

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REFRAC TO A DIFFERENT RESERVOIR.
SEE APPLICATION FOR PERMIT TO DRILL C-1011 FOR SUCH PROPOSALS.

OIL WELL GAS WELL OTHER- **Water Injection**
7. Name of Operator
TEXACO INC.
8. Address of Operator
P.O. Box 728, Hobbs, New Mexico 88240
9. Location of Well
UNIT LETTER **0** **340** FEET FROM THE **South** LINE AND **1580** FEET FROM
THE **East** LINE, SECTION **6** TOWNSHIP **10-S** RANGE **35-E** N.M.P.M.

7. Unit Agreement Name
Central Vacuum Unit
8. Name of Lease
Central Vacuum Unit
9. Well No.
122
10. Field and Pool, or Well-foot
Vacuum Grayburg-San Andres
11. Elevation (Show whether DF, RT, GR, etc.)
3970' (GR)
12. County
Lea

14. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING OTHER
SUBSEQUENT REPORT OF:
REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB 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 1109.

TOTAL DEPTH 4800'
13-3/8" OD 48# K-55 Csg set @ 356'
9-5/8" OD 32# K-55 csg set @ 1540'
7" OD 23# K-55 csg Set @ 2816'

1. Ran 4788' (117 jts) 4-1/2" OD 10.5# K-55 csg & set @ 4800'.
2. Cemented w/800 sx Class "C" cement. Cement did not circulate. Ran temperature survey. Top of cement @ 812'. Job complete 9:00 p.m. 8-27-79. WOC in excess of 18 Hrs.
3. Tested 4-1/2" csg to 1500# for 30 minutes, 10:00-10:30 a.m., 9-3-79. Tested OK. Job complete 10:30 a.m., 9-3-79.

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

SIGNED *Jerry Sexton* TITLE Asst. Dist. Supt. DATE 9-5-79

APPROVED BY Jerry Sexton TITLE Dist. 1. Supt. DATE SEP 11 1979

CONDITIONS OF APPROVAL, IF ANY: