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J.S.G.S.		
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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <u>B-1113</u>
7. Unit Agreement Name CENTRAL VACUUM UNIT
8. Farm or Lease Name CENTRAL VACUUM UNIT
9. Well No. <u>135</u>
VACUUM GRAYBURG SAN ANDRES
12. County LEA

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.
(APPLICATION FOR PERMIT USE FORM C-101 FOR SUCH PROPOSALS.)

OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- WATER INJECTION
Name of Operator TEXACO Inc.		
Address of Operator P. O. BOX 728, HOBBS, NEW MEXICO 88240		
Location of Well UNIT LETTER <u>L</u> <u>1600</u> FEET FROM THE <u>South</u> LINE AND <u>40</u> FEET FROM THE <u>West</u> LINE, SECTION <u>6</u> TOWNSHIP <u>18-S</u> RANGE <u>35-E</u> N.M.P.M.		

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

3984' (GR)

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"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

REMEDIAL WORK	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

ALTERING CASING	<input type="checkbox"/>
PLUG AND ABANDONMENT	<input 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.

SUBJECT WELL WAS COMPLETED AS SHUT-IN WATER INJECTION

ON 12-16-78, PENDING COMPLETION OF INJECTION

FACILITIES. PLEASE BE ADVISED THAT ON 12-27-78,

WATER INJECTION BEGAN IN SUBJECT WELL.

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

SIGNED [Signature]

TITLE ASST. DIST. SUPT.

DATE 1-5-79

APPROVED BY [Signature]

TITLE

DATE JAN 10 1979

CONDITIONS OF APPROVAL, IF ANY: