

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-79

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
B-3011

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.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Injection	7. Unit Agreement Name Vacuum Grayburg San Andres Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Vacuum Grayburg San Andres Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 59
4. Location of Well UNIT LETTER E 40 FEET FROM THE West LINE AND 2500 FEET FROM THE North LINE, SECTION 2 TOWNSHIP 18-S RANGE 34-E NMPM.	10. Field and Pool or Wildcat Vacuum Grayburg San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4023' (GR)	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 ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☒
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

TOTAL DEPTH 1500
13 3/8" OD 54.5# K-55 Csg Set @ 365'

1. Ran 1490' (Jts.) 9 5/8" OD 32# K-55 Csg set @ 1500'.
2. Cemented w/800 sx. Class 'C' cement containing 2% CC. Cement circulated.
Job complete 11:00 PM, 3-27-79. WOC 18 hrs.
3. Tested 9 5/8" OD Csg w/1000# for 30 minutes, 5:00 - 5:30 PM, 3-28-79.
Tested OK. Job complete 5:30 PM, 3-28-79.

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 3-29-79
Orig. Signed by
Jerry Sexton
APPROVED BY Dist. I, Supv. TITLE _____ DATE APR 1
CONDITIONS OF APPROVAL, IF ANY: