

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No. B-1258-1	

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		7. Unit Agreement Name
2. Name of Operator TEXACO INC.		8. Farm or Lease Name NEW MEXICO "AE" STATE
3. Address of Operator P. B. BOX 728, HOBBS, NEW MEXICO 88240		9. Well No. 26
4. Location of Well UNIT LETTER <u>E</u> <u>2080</u> FEET FROM THE <u>NORTH</u> LINE AND <u>990</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>12</u> TOWNSHIP <u>18-S</u> RANGE <u>34E</u> NMPM.		10. Field and Pool, or Wildcat VACUUM ABO REEF
15. Elevation (Show whether DF, RT, GR, etc.) 3993' (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 ☐	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 JOB ☒	

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 1503.

SPUD 17 1/2" HOLE, 2:00, 8-6-83
TOTAL DEPTH 350'

1. RAN 335' (8 JTS.) 13 3/8" OD 48# H-40 CASING AND SET @ 350'.
2. CEMENTED WITH 500 SX. CLASS H CEMENT CONTAINING 2% CACL. CEMENT CIRCULATED. JOB COMPLETE 12:01 AM, 8-7-83. WOC IN EXCESS OF 18 HRS.
3. TESTED 13 3/8" CASING TO 600# FOR 30 MINUTES, 8:00-8:30 PM, 8-7-83. TESTED OK. JOB COMPLETE 8:30 PM, 8-7-83.

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

SIGNED [Signature] TITLE ASST DIST MGR DATE AUG 15 1983

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE AUG 17 1983

CONDITIONS OF APPROVAL, IF ANY: