| Submit 3 Copies to Appropriate District Office | State of New Mexico Energy, Minerals and Natural Resources Department | | Form C-103 Revised 1-1-89 |
|---|--|--|--|
| DISTRICT I P.O. Box 1980, Hobbs, NM 88240 | OIL CONSERVATION DIVISION P.O. Box 2088 | | WELL API NO. 30-025-30717 |
| DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 | | 5. Indicate Type of Lease | |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | STATE X FEE 6. State Oil & Gas Lease No. 857948 | |
| 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.) | | | 7. Lease Name or Unit Agreement Name VACUUM GRAYBURG SAN ANDRES UNIT |
| 1. Type of Well: ORL GAS WELL X WELL OTHER | | | |
| 2. Name of Operator TEXACO PRODUCING INC. | | | 8. Well No. 157 |
| 3. Address of Operator P. O. Box 3109 Mid | lland, Texas 79702 | | 9. Pool name or Wildcat |
| 4. Well Location | | VACUUM GRAYBURG SAN ANDRES | |
| Unit Letter C: 710 Feet From The NORTH Line and 2530 Feet From The WEST Line | | | |
| Section 1 Township 18-SOUTH Range 34-EAST NMPM LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3993' | | | |
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | | | |
| . The state of th | | | SEQUENT 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 CASING TEST AND C | | EMENT JOB | |
| OTHER: EXTEND PERMIT EXPIRAT | TION DATE X OTHER: | | |
| 12. 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. | | | |
| DUE TO DRILLING PRIORITY AND SCHEDULING DELAYS, THIS WELL CANNOT BE SPUDDED BEFORE THE JUNE 12, 1990 EXPIRATION DATE. PLEASE EXTEND THIS PERMIT FOR AN ADDITIONAL SIX (6) MONTHS. | | | |
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| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | |
| SIGNATURE | | | |

TYPE OR PRINT NAME C. P. BASHAM

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPPRIVISOR

Permet esteaded to 12-12-90

TELEPHONE NO. 915-6884620

MAY 1 5 1990