State of New Mexico Energy, Minerals and Natural Resources Department

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F	Revis	ed	1-1	-8
•	/CTIO	œ,		~

Submit 3 copi to Appropriate District Office	
DISTRICT I	

P.O. Box 1980, Hobbs, NM 88240 DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

Unit Letter .

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 WELL API NO.

Feet From The WEST

INSTALLED NEW INJ PKR & TESTED CASING

NMPM

situicate type of Louiso	STATE	\boxtimes	FEE [
State Oil (Goe I assa N	<u></u>		

LEA COUNTY

 \boxtimes

DISTRICT III 1000 Rio Brazos Rd., Aztec	NM 87410	6. State Oil / Gas Lease No. B-1306
S (DO NOT USE THIS FO	UNDRY NOTICES AND REPORTS ON WELL RM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ERENT RESERVOIR. USE "APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name VACUUM GRAYBURG SAN ANDRES UNIT
Type of Well: OIL WELL	GAS OTHER INJECTION	
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.	8. Well No. 148
3. Address of Operator P.O. BOX 730, HOBBS, NM 88240		9. Pool Name or Wildcat VACUUM GRAYBURG SAN ANDRES
4. Well Location		

		10. Elevation (Snow whethe	ruf, KKB,	81,GR, etc.) 3997' GR		
11.	Check /	Appropriate Box to Indi	cate Na	ture of Notice, Report, or Otl	ner Data	
NOTICE OF IN	TENTI	ON TO:		SUBSEC	UENT REPORT OF:	
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OPERATION	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	П			CASING TEST AND CEMENT JOB		

Feet From The NORTH Line and 660

__ Range __ 34E_

OTHER:

5-3-95

OTHER:

- 1. MIRU. RELEASED INJECTION PKR & TOH W/ INJECTION EQUIP.
- 2. TIH W/ 2 3/8" CEMENT LINED TUBING STRING AND NEW 7" AD-1 INJECTION PKR, CIRCD HOLE W/ PKR FLUID, SET PKR @ 4157'.
- 3. TESTED 7" CASING FROM SURFACE TO PKR SET @ 4157" AS PER NMOCD GUIDELINES TO 500# FOR 30 MINUTES, HELD OK.

Township 18S

4. RETURNED WELL TO INJECTION.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

(INTERNAL TEPI STATUS REMAINS: INJ)

I hereby certify that the information SIGNATURE	a above is true and pomplete to the best of my knowledge and belief. TITLE Engr Asst	DATE
TYPE OR PRINT NAME	Monte C. Duncan	Telephone No. 397-0418
(This space for State Use) APPROVED BY	ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	MA/ 12 100

^{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.

