State of New Mexico

Form C-103 Revised 1-1-89

Submit 3 copies
to Appropriate
Submit 3 copies to Appropriate District Office

Enei	.vinerals	and	Natural	Resources	Department

District Office						IVEVIS	eu 1-1-0 9
<u>DISTRICT I</u>		OIL CONSERV	ATIO	ON DIVISION	WELL API NO.		
P.O. Box 1980, Hobbs, NM	88240		3ox 2088			30-025-32005	
DISTRICT II		Santa Fe, New			5. Indicate Typ		
P.O. Box Drawer DD, Artesia	a, NM 88210					STATE 🔀	FEE 🗍
DISTRICT III					6. State Oil / G		
1000 Rio Brazos Rd., Aztec,		TIOSO AND DEDODEO	>>! \A/F!			B-1306	
(DO NOT USE THIS FO	RM FOR PRO	TICES AND REPORTS (POSALS TO DRILL OR TO RVOIR. USE "APPLICATIO C-101) FOR SUCH PROPOS	DEEPEN N FOR P	OR PLUG BACK TO A	-	e or Unit Agreement Name O 'R' STATE NCT-3	
Type of Well: OIL WELL	GAS WEL		TION	·			
2. Name of Operator	TEXACO EX	PLORATION & PRODUCTION	ON INC.		8. Well No.	28	
3. Address of Operator	P.O. BOX 73	30, HOBBS, NM 88240		~	9. Pool Name o	or Wildcat VACUUM DRINKARD	
4. Well Location Unit Letter	p ·	1310 Feet From The	SOUT	H _Line and _110	Feet From T	he <u>EAST</u> Line	
				ange <u>34-E</u> N			1
		10. Elevation (Show whether	DF, RKB,	RT,GR, etc.) GR-3990'			
11.	Check A	ppropriate Box to Indic	ate Na	ture of Notice, Repor	t, or Other [Data	
NOTICE OF	INTENTIO	ON TO:		SI	UBSEQUE	NT REPORT OF:	
PERFORM REMEDIAL WOR	_	PLUG AND ABANDON	П	REMEDIAL WORK		ALTERING CASING	
	=	CHANGE PLANS	$\overline{\Box}$	COMMENCE DRILLING OP	ERATION	PLUG AND ABANDONMEN	т 🗀
TEMPORARILY ABANDON			ل ا	CASING TEST AND CEME	ит ЈОВ		
PULL OR ALTER CASING				OTHER:	_	BEGAN INJECTION	\boxtimes
OTHER:				OTTIEK.			
work) SEE RULE 1103		erations (Clearly state all pertin					
(ORIGINAL CHART ATTA		ITH INJECTION PACKER S	E1 62 /4	SO AS PER NINIOCO GOIL	JELINES 10 S	our For Solving, Files O	
11/21/95	COLLE, COL	or or or or or or					
BEGAN INJECTION OF V	WATER INTO	WELL					
11/28/95 NJECTION RATE OF 697	7 RWPD @ 51	5 PSI					
(INTERNAL TEPI STATU		• , •.					
(MILMAL ILITOTATO	o,						
I hereby certify that the information abo	ove is true and comple	te to the best of my knowledge and belief.					
SIGNATURE	orte (2	TITLE	Engi	Asst		DATE12/8/95_	
TYPE OR PRINT NAME		Monte C. Duncan				Telephone No. 397-0	418
(This space for State (QRIC))	!• <u>្</u> ឡុំ ្រូវនទាក់ ប	Contract Contract				DEC 1	2 199
	و پور کانگ	ON OF THE SEXTON TITLE				DATE	
APPROVED BY		1111LE					

JABA)

CONDITIONS OF APPROVAL, IF ANY

DATE_ DeSoto/Nichols 10-94 ver 2.0

