

# OIL CONSERVATION DIVISION

**DISTRICT I**  
P.O. Box 1980, Hobbs, NM 88240  
**DISTRICT II**  
P.O. Box Drawer DD, Artesia, NM 88210  
**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-32874
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-1306
7. Lease Name or Unit Agreement Name	NEW MEXICO 'R' STATE NCT-1
8. Well No.	17
9. Pool Name or Wildcat	VACUUM DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3978' GR

**SUNDY NOTICES AND REPORTS ON WELL**  
(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. Type of Well:	OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTION <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	P.O. BOX 730, HOBBS, NM 88240
4. Well Location	Unit Letter <u>G</u> : <u>2530</u> Feet From The <u>NORTH</u> Line and <u>2530</u> Feet From The <u>EAST</u> Line Section <u>6</u> Township <u>18-S</u> Range <u>35-E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3978' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>
OTHER: <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: CASING TEST, BEGAN INJECTION OF WATER <input checked="" type="checkbox"/>

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.

10/2/95

NOTIFIED NMOC. TSTD CASING WITH INJECTION PACKER SET @ 7553' AS PER NMOC GUIDELINES TO 520# FOR 30 MIN, HELD OK.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

10/3/95

BEGAN INJECTION OF WATER INTO WELL

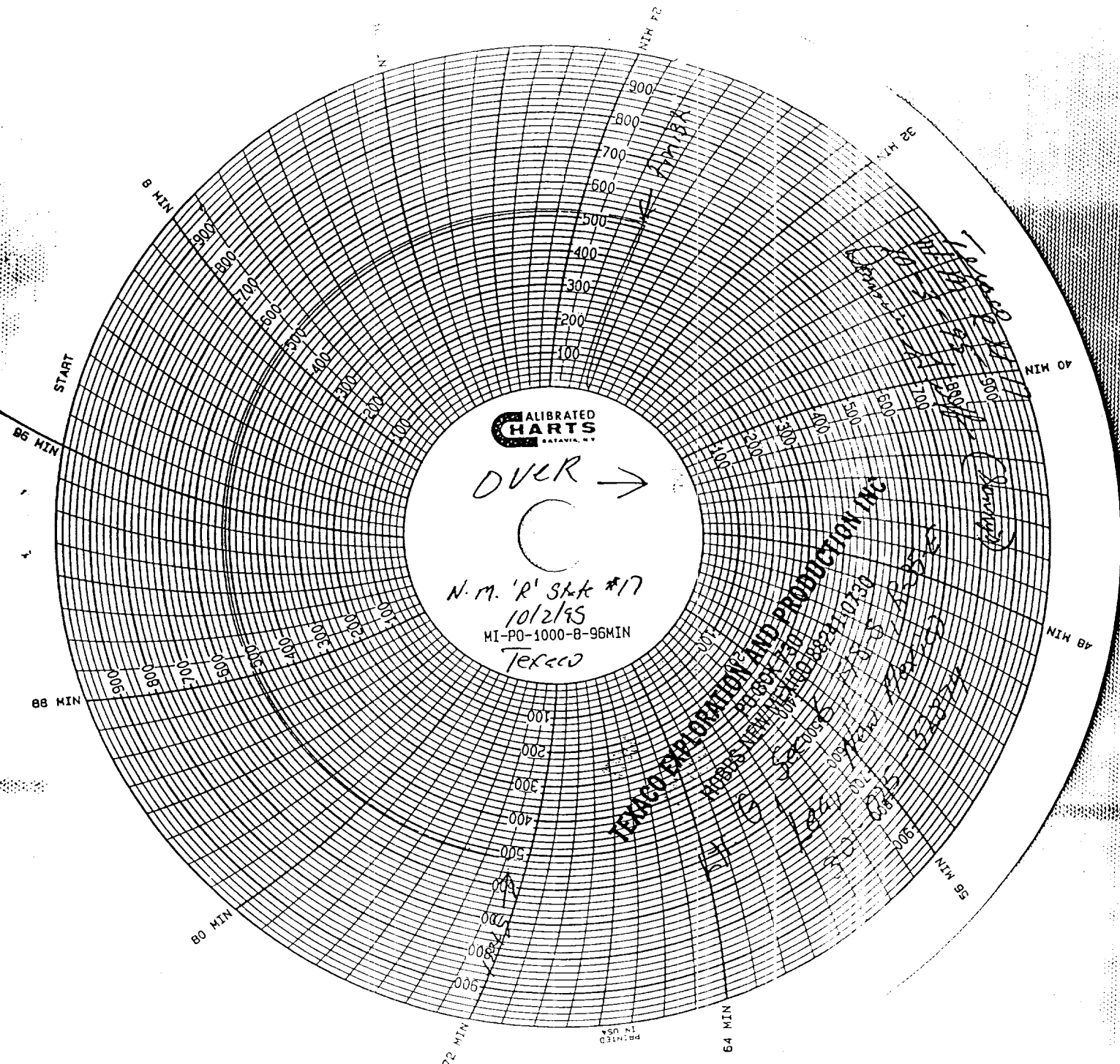
INJECTION RATE OF 688 BWPD @ 771 PSI

(INTERNAL TEPI STATUS: INJ)

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

SIGNATURE Monte C. Duncan TITLE Engr Asst DATE 11/13/95  
TYPE OR PRINT NAME Monte C. Duncan Telephone No. 397-0418

(This space for State Use) **ORIGINAL**  
APPROVED BY DISTRICT ENGINEER TITLE DISTRICT ENGINEER DATE NOV 22 1995  
CONDITIONS OF APPROVAL, IF ANY: JCBN



DATE 10/2/95  
WELL NAME N.M. 'R' STATE #17  
SUPERVISOR Don Diamond  
PACKER TYPE Baker  
PACKER SETTING DEPTH 7552.50  
PERFORATIONS \_\_\_\_\_

10/2/95  
Checked  
10/2/95