

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-1080

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- <u>Water Injection Well</u>	7. Unit Agreement Name <u>Vacuum Grayburg</u> <u>San Andres Unit</u>
2. Name of Operator <u>Texaco Producing Inc.</u>	8. Farm or Lease Name
3. Address of Operator <u>Box 728, Hobbs, New Mexico 88240</u>	9. Well No. <u>48</u> W114
4. Location of Well UNIT LETTER <u>F</u> <u>1330'</u> FEET FROM THE <u>North</u> LINE AND <u>1330'</u> FEET FROM THE <u>West</u> LINE, SECTION <u>1</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>Vacuum Grayburg</u> <u>San Andres</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>4005' DF</u>	12. County <u>Lea</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☒	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPS. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER ☐	OTHER ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐

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 1103.

1. M28U, Install BOP, Pull tubing & Packer
2. TIH w/4 3/4" bit and cleanout to PBTD, 4788'. Spot bleach & squeeze into existing perms. POH.
3. TIH w/Perforating Gun and shoot w/2 JSPI: 4280-4372 (13 Intervals) POH.
4. GIH w/packer & tubing and Acidize w/9000 gals 15% gelled NERE HCL. POH.
5. Run Injection equipment, circulate packer fluid, set packer, test, Put on Injection.

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

James A. Brink 393-4031
A. Gerandt TITLE Area Superintendent DATE _____

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR TITLE _____ DATE MAY 18 1987

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAY 15 1927
OCC
HOBBS OFFICE

RECEIVED
JUN 1 1927