DISTRIBUTION			Form C-103 Supersedes Old
SANTA FE	NEW M	C-102 and C-103 Effective 1-1-65	
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State X Fee 5. State Oil & Gas Lease No.
OPERATOR			5. State Off & Gds Ledse No.
SUI {DO NOT USE THIS FORM FO USE "APPL			
1. WELL GAS WELL OTHER INJECTION Well			7. Unit Agreement Name
2. Name of Operator	OTHER-	Jecotou Mett	West Vacuum Unit 8. Farm or Lease Name
TEXACO Inc.			o, ram or Lease Manie
3. Address of Operator		000kg	9. Well No.
P. O. Box 728, H	obbs, New Me	xico 88240	5
4. Location of Well	660	South 660	10. Field and Pool, or Wildandres
UNIT LETTER	FEET FRO	DM THE LINE AND FE	ET FROM Vacuum Grayburg San
THE West LINE, S	28	TOWNSHIP 17-S RANGE 34-E	_ NMPM.
		ration (Show whether DF, RT, GR, etc.)	12. County
		4069 DF	Lea
16. Che	ck Appropriate Bo	x To Indicate Nature of Notice, Report	or Other Data
NOTICE O	F INTENTION TO:	SUBSE	QUENT REPORT OF:
PERFORM REMEDIAL WORK	DI I	UG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON	F	COMMENCE DRILLING OPNS.	ALTERING CASING PLUG AND ABANDONMENT
PULL OR ALTER CASING	сни	ANGE PLANS CASING TEST AND CEMENT JOB	
		other Convert	to injection x
OTHER	· · · · · · · · · · · · · · · · · · ·		
17. Describe Froposed or Complete	ed Operations (Clearly st	tate all pertinent details, and give pertinent dates, in	icluding estimated date of starting any proposed
work) SEE RULE 1103.			
'I Was I I and made		non (n) 1 1 2000	hans
1. Pulled rod	s and tubing	. Ran GR-N log from 3300-	4735.
2. Ran tubing	and packer.	set packer @ 4465.	
_1 11111	omia poorton,	Dot public o vioy.	
3. Injecting	water 8-31-7	3.	
18. I hereby certify that the information	ation above is true and c	omplete to the best of my knowledge and belief.	
	// \	Annh Dent Comb	0 h 72
SIGNED / COLUMN	ny	Asst. Dist. Supt.	DATE
	Orlg. Signed by		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
APPROVED BY	Joe D. Ramey		DATE
CONDITIONS OF APPROVAL, IF	ANY:		
	•		