61 113 . 1		1	State of	of New	Mexico			
Submit 3 copies to Appropriate District Office		Enc. Jy.	Minerals and N	atural F	Resources Department			Form C-103 Revised 1-1-89
DISTRICT I			ONSEDV	'A TT	ON DIVISION	WELL API NO		1101300 171-03
P.O. Box 1980, Hobbs, NM 88240  P.O. Box 1980, Hobbs, NM 88240								
P.O. Box 2088  P.O. Box 2088  P.O. Box 2088  Santa Fe, New Mexico 87504-2088							30 025 02185 pe of Lease	
P.O. Box Drawer DD, Artesi	a, NM 88210	J. Hukate ty	STATE	FEE [				
DISTRICT III  1000 Rio Brazos Rd Aztec	NM 87410	6. State Oil / C						
1000 Rio Brazos Rd., Aztec, NM 87410  SUNDRY NOTICES AND REPORTS ON WELL							B-4118	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A						7. Lease Nam	e or Unit Agreement N	lame
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  (FORM C-101) FOR SUCH PROPOSALS.)							JUM UNIT	
1. Type of Well: OIL WELL	GA WE	1						
2. Name of Operator  TEXACO EXPLORATION & PRODUCTION INC.						8. Well No.	16	
3. Address of Operator	P.O. BOX 7	730, HOBBS, N	NM 88240			9. Pool Name VAC	or Wildcat UUM GRAYBURG SAN	ANDRES
4. Well Location	_	4000						
Unit Letter	G:	1980	Feet From The	<u>NOR</u>	TH Line and 1980	Feet From 1	he <u>EAST</u> L	ine
Section 33		_ Township_			Range 34E NM	IPM	LEA CO	YTAUC
11.			on (Show whether I		40/1 DF			
			Box to Indica	ite Na	ture of Notice, Report	i, or Other [	Data	
NOTICE OF	INTENTIO	ON TO:			SU	JBSEQUE	NT REPORT (	OF:
PERFORM REMEDIAL WOF	≀к 🔲	PLUG AND A	BANDON		REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OP					RATION 🗌	PLUG AND ABANDO	NMENT	
PULL OR ALTER CASING					CASING TEST AND CEMEN			
OTHER:				_ 🖳	OTHER:	RAN CASING	INTEGRITY TEST	🛛
<ol> <li>Describe Proposed or C work) SEE RULE 1103.</li> </ol>	ompleted Ope	erations (Clear	ly state all pertine	nt detai	ls, and give pertinent dates,	including estim	nated date of starting	any proposed
1-29-94								
1. MIRU. RELEASED PK	R & TOH W/	INJ EQUIP.						
2. TIH W/ NEW 2 3/8" TB	3 STRING A	ND NEW INJ I	PKR, CIRCD HO	LE W/ I	PKR FLUID, SET PKR @ 4	060'.		
3. TESTED 5 1/2" CASING 30 MINUTES, HELD OF	FROM SUR	FACE TO PK	R SET @ 4060°	AS PEF	R NMOCD GUIDELINES TO	O 480# FOR		•
4. RETURNED WELL TO	INJECTION.							
(ORIGINAL CHART ATT	ACHED, CO	PY OF CHAR	T ON BACK)					
			·					

I hereby certify that the information above is truband complete to the best of my knowledge an SIGNATURE		d belief. TITLE	Engr Asst	DATE	3/14/94	
TYPE OR PRINT NAME	Monte C. Duncan			Telephone No.	397-0418	
(This space for State Use)			ORIGINAL SIGNED BY JERRY SEXTON		MAR i 6	40 <b>07</b>
APPROVED BYCONDITIONS OF APPROVAL, IF AN	NY:	TITLE_	DISTRICT I SUPERVISOR	DATE	TIAK I O	(334 



