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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. State B-1576
7. Unit Agreement Name West Vacuum Unit
8. Farm or Lease Name West Vacuum Unit
9. Well No. 9
10. Field and Pool, or Wildcat Vacuum
12. County Lea

## 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 <input type="checkbox"/> GAS <input type="checkbox"/> OTHER- Injection Well
2. Name of Operator TEXACO Inc.
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico
4. Location of Well UNIT LETTER A, 990 FEET FROM THE North LINE AND 990 FEET FROM THE East LINE, SECTION 33 TOWNSHIP 17-S RANGE 34-E NMPM.

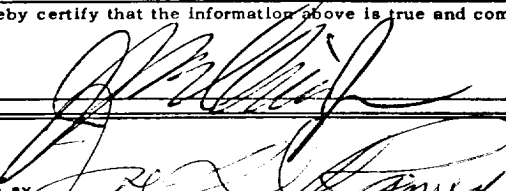

15. Elevation (Show whether DF, RT, GR, etc.) 4062'
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16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Convert to Water Injection Well

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.

The following work has been completed on subject well to convert to water injection well:

- 1) Pull rods & tubing.
- 2) Clean well out to the total depth of 4710'.
- 3) Ran GR/N Log.
- 4) Ran 2-3/8" plastic coated tubing w/packer.
- 5) Set packer at 4536'.
- 6) Connect injection line effective date 7:00 AM January 29, 1968.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED 	TITLE Asst. Dist. Superintendent	DATE January 31, 1968
APPROVED BY 	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		