Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-103
Revised 1-1-89

WELL API NO. 30 025-02229
~~3002502017~~9

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B-1306

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.)

7. Lease Name or Unit Agreement Name: Central Vacuum Unit

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator: Texaco Producing Inc.

8. Well No. 79

3. Address of Operator: P.O. Box 730, Hobbs, NM 88240

9. Pool name or Wildcat: Vacuum Grayburg San Andres

4. Well Location
Unit Letter K : 1840 Feet From The West Line and 2140 Feet From The South Line

Section 36 Township 17S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3999' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

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

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.

11-01-89 thru 11-11-89

1) MIRU PU. Instld BOP. TOH w/sub pmp. TIH w/bit to 4710'
2) TIH w/TP & pkr. Spt 800 gal 15% across OH 4252-4710'. PSA 3798'. A/OH w/9000 gals 15% NEFE in 3 stgs w/3000# RS. Max P-2200#/Min P-2200#. AIR 4 BPM. ISIP-1300#. Rel'd pkr. Checked for fill.
3) S/8 hrs. Rec 7 BNO, 215 BLW. Sqz perfs w/200 gal scale inhibitor & F/w/450 bbls KCl wtr. TOH w/tbg & pkr.
4) TIH w/prod equip & returned to production.

Test Prior - 106 BO, 944 BW.
Test After - 224 BO, 2742 BW.

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

SIGNATURE J A Head TITLE Area Manager DATE 12/15/89

TYPE OR PRINT NAME J. A. Head TELEPHONE NO. (505)393-7191

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
APPROVED BY DISTRICT I SUPERVISOR TITLE DATE JAN 05 1990

CONDITIONS OF APPROVAL, IF ANY: