were the west of the								
VERGY AND MINERALS DEPAR	TIMENT	CONSERVA	TION DIVISI	ON		•		
HO, BY COPICS RECEIVED	<del></del>	P. O. BOX		014		Form C-103		
DISTRIBUTION	<del>  </del>			•		Revised 10-1-7.		
SANTA PE	<del>  </del>	ANTA FE, NEW	MEXICO 8750	1	Sa. Indicate Typ	-11		
V.S.O.S.	+							
LAND OFFICE	+			•	State X	Foo L		
OPERATOR	+-1				5. State Oil & G			
To can be	لسسله				B-1	565		
SU NOT USE THIS FORM FO	A PROPOSALS TO ORILL	ND REPORTS ON	CA YO A DIFFERENT ME	SCRVOIR.				
(DO NOT USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)						7. Unit Agreement Name		
OIL X GAS OTHER-					Central Vacuum Unit			
	J OTHER-		<del> </del>		8. Farm or Leas			
TEXACO Inc.					Central V	acuum Unit		
Address of Operator					9. Well No.			
·					53			
Location of Wellox 720, H					VacTuh चिने व			
С	660	FROM THE North	1980	FEET FROM	San Andres			
•		17-S			<i>(1111111)</i>			
THELINE,	SECTION	TOWNSHIP	RANGE	нмри.				
mmmm	THINK E	lovation (Show whether I	F RT GR. etc.)		12. County	WHILLY.		
	111111111111111111111111111111111111111	4013			Lea			
Ch	eck Appropriate I	Box To Indicate N	ature of Notice,	Report or Oth	ner Data			
	OF INTENTION TO			SUBSEQUENT	REPORT OF	:		
ERFORM REMEDIAL WORK		PLUG AND ABANDON	REMEDIAL WORK		ALTE	RING CASING		
EMPORARILY ABANDON			COMMENCE DRILLING	OPHS.	PLUG	AND ABANDOHMENT		
		CHANGE PLANS	CASING TEST AND CE		_			
ULL OR ALTER CABING			OTHER Deep	en in San	Andres	[X		

RIGGED UP. INSTALL BOP. PULL TUBING AND SUBMERSIBLE PUMP. CLEAN OUT AND DEEPEN TO 4723' (TD). 1.

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1108.

2.

	3.	SET PKR @ 3999'.	ACIDIZE	OPEN-HOLE 4	1094'-47	23' W/	10,000	
	٠.	GALS 15% GELLED	NEFE ACID	CONTAINING	RADIOAC	rive ma	TERIAL	
		IN 3-STAGES US:	ING 2000#	ROCK SALT	& 2000#	MOTH I	BALLS.	
		FLUSH W/200 BBLS						
	4.	INSTALL SUBMERS	BLE PUMPIN	G EOUIPMEN'	r. TEST	AND PL	ACE ON	
	4.	PRODUCTION.						
		PRODUCTION.						
					•			
•					<u> </u>			
8. I hereby	certify that	the information above is true and co	omplete to the best of	my knowledge and beli	iel.			
		1 / 1/1						
	( )	X Adull	TITLE ASS	t Dist Mar		_ DATE _	7-23-84	
ICHED		1-2-1-2 /h-						
		Eddle W. Jeny					JUL 251	984
	ės:	i & Gas to specior				DATE		.JU-1
PPROVED BY		14 104 104 11	TITLE	<del></del>				
ONDITIONS	S OF APPR	IOVAL, IF ANY:						
					•			