

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

API No. 30-025-02924

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1399-1	

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.)

OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator			East Vacuum Gb/SA Unit
Address of Operator			8. Farm or Lease Name
4001 Penbrook Street, Odessa, Texas 79762			East Vacuum Gb/SA Unit
Location of Well			9. Well No. / Tract 2913
UNIT LETTER <u>0</u> , <u>660</u> FEET FROM THE <u>south</u> LINE AND <u>1980</u> FEET FROM			001
THE <u>east</u> LINE, SECTION <u>29</u> TOWNSHIP <u>17-S</u> RANGE <u>35-E</u> NMPM.			10. Field and Pool, or Wildcat
			Vacuum Gb/SA
15. Elevation (Show whether DF, RT, GR, etc.)			12. County
3989' RKB			Lea

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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 1508.

Well uneconomical to produce. Temporarily shut in pending future use in enhanced recovery project.

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

SIGNED W. J. Mueller TITLE Engineering Supervisor, DATE Aug 5 1987
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
APPROVED BY _____ TITLE _____ DATE AUG 5 1987

RECEIVED

AUG 4 1987

OCO
HOBBS OFFICE