

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO.

30-025-02959

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-1518

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 ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Texaco Exploration and Production Inc.

8. Well No.

50

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 D : 660 Feet From The NORTH Line and 660 Feet From The WEST Line
County

Section 31 Township 17-S Range 35-E NMPM LEA

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

3997' DF

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

11/6/92 - 11-7-92

1. SI WELL. SCALE SQUEEZED WELL W/ 5 DRUMS TH-793 MIXED IN 60 BBLs FRESH WATER DOWN ANNULUS, OVERFLUSHED W/ 800 BBLs FRESH WATER. SION.

2. RETURNED WELL TO PRODUCTION.

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

SIGNATURE Monte C. Duncan

TITLE ENGINEER'S ASSISTANT

DATE 11-30-92

TYPE OR PRINT NAME MONTE C. DUNCAN

TELEPHONE NO. 393-7191

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

DEC 01 '92

RECEIVED

NOV 3 0 1992

OCD HOBBS OFFICE