

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-79

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DISTRIBUTION	
SANTA FE	
FILE	
J.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-9106

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.)

☐ GAS WELL ☐ OTHER- Water Injection

Operator

TEXACO Inc.

Address of Operator

P. O. Box 728, Hobbs, New Mexico 88240

Location of Well

LETTER J 2970 FEET FROM THE North LINE AND 2310 FEET FROM
East 8 TOWNSHIP 17-S RANGE 36-E NMPM.

7. Unit Agreement Name
West Lovington Unit
8. Farm or Lease Name
West Lovington Unit
9. Well No.
62
10. Field and Pool, or Wildcat
Lovington San Andres West

15. Elevation (Show whether DF, RT, GR, etc.)
3900' (GR)

12. County
Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
WELLY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER <u>Repair Water Flow</u> <input checked="" type="checkbox"/>	

Describe the Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations.)
SEE RULE 1103.

1. RIGGED UP. PULL TUBING.
2. SET RBP @ 3986' AND SPOT 2 SX SAND ON PLUG.
3. SET CEMENT RETAINER @ 1940'.
4. CEMENT CASING LEAK @ 2050' W/ 100 SX CLASS H CEMENT CONTAINING 3% CACL.WOC. DOC.
5. TESTED TO 800# FOR 30 MINUTES, 9:00-9:30 AM, 12-13-83. TESTED OK.
6. PULL RBP. RUN 2 3/8" PLASTIC COATED TUBING W/PACKER AND SET @ 4640'.
7. RETURN WELL TO WATER INJECTION.

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

[Signature] TITLE Asst Dist Mgr. DATE 12-22-83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

TITLE DATE DEC 27 1983

IS OF APPROVAL, IF ANY:

RECEIVED
DEC 27 1983
G.C.D.
HONORS OFFICE