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NEW MEXICO OIL CONSERVATION COMMISSION

HOBBS OFFICE O. C. C.
JUN 27 3 29 PM '67

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

4. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
State - B-1056-1	

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name NONE
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name N. M. "C" State
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico	9. Well No. 5
4. Location of Well UNIT LETTER 0 460 FEET FROM THE South LINE AND 2080 FEET FROM THE East LINE, SECTION 25 TOWNSHIP 17-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat Vacuum Clorieta
15. Elevation (Show whether DF, RT, GR, etc.) 4009' (D. F.)	12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

17. 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.

We propose to do the following work on subject well:

1. Pull the pump equipment.
2. Perforate the 2 7/8" O. D. Casing with one jet shot at 6161', 6164', 6179', 6181', 6186', and 6188'.
3. Acidize perforations with 500 gallons 15% NE acid.
4. Swab well, recover load, Test, and return well to production.

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

SIGNED J. G. Blevins, Jr. TITLE Assistant District Supt. DATE June 27, 1967

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: