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NEW MEXICO OIL CONSERVATION COMMISSION O. C. C.

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

Nov 30 10 43 AM '66

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. State - B-155-1	

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 NCT-1
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico	9. Well No. 19
4. Location of Well UNIT LETTER F, 2179 FEET FROM THE West LINE AND 1980 FEET FROM THE North LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat Vacuum Blinbry
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <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"/>	

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. Unseat pump, and perform chemical wash as follows:
2. Spearhead with 9 gallons surfactant, 21 gallons S-71 block-buster & 55 gallons lease crude, and follow with 55 gallons champion FSD & 750 gallons 5% hydrochloric acid.
3. Seat pump, and shut in for 48 hours.
4. Unseat pump and squeeze perforations with 30 gallons baroid H-35 in 30 BBLs water followed with 58 BBLs water with two gallons S-32 surfactant.
5. Shut well in 24 Hours, 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 <u>Dan Gillett</u>	TITLE <u>Assistant District</u>	DATE <u>Nov. 30, 1966</u>
<u>Dan Gillett</u>	SIGNED <u>Superintendent</u>	
APPROVED BY _____	TITLE <u>ENGINEER DISTRICT No.</u>	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		