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NEW MEXICO OIL CONSERVATION COMMISSION

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

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

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
2. Name of Operator TEXACO Inc.		8. Farm or Lease Name NM 'Q' St.
3. Address of Operator P. O. Box 728, Hobbs, NM 88240		9. Well No. 4
4. Location of Well UNIT LETTER P 500 FEET FROM THE South LINE AND 760 FEET FROM THE East LINE, SECTION 25 TOWNSHIP 17 S RANGE 34 E NMPM.		10. Field and Pool, or Wildcat Vacuum Abo (N) Wolfcamp & Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4003' DF		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 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 checked="" type="checkbox"/> Downhole commingle	CASING TEST AND CEMENT JOBS <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.

1. Run spiral perforating gun in Abo string.
Perforate all three strings w/4 JSPP 10070-10080'.
2. Produce well from Penn string.

Case No. 5296
Order No. R-4859

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

SIGNED  TITLE Asst. Dist. Supt. DATE 12-16-74

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: