COPIES RECEIVED		
TRIBUTION		
FE		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease

State [X]   Fee [ ]

5. State Oil & Gas Lease No.

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.)

7. Unit Agreement Name

1.
OIL WELL [X]   GAS WELL [ ]   OTHER-

8. Farm or Lease Name

N.M. 'O' St NCT-1

2. Name of Operator

TEXACO Inc.

9. Well No.

15

3. Address of Operator

P. O. Box 723 - Hobbs, New Mexico   88240

10. Field and Pool, or Wildcat

Vacuum Glorieta

4. Location of Well

UNIT LETTER __I__ , __1800__ FEET FROM THE __South__ LINE AND __500__ FEET FROM

THE __East__ LINE, SECTION __36__ TOWNSHIP __17S__ RANGE __34E__ NMPM.

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

3996' DF

12. County

Lea

16.
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK [ ]

TEMPORARILY ABANDON [ ]

PULL OR ALTER CASING [ ]

PLUG AND ABANDON [ ]

CHANGE PLANS [ ]

OTHER _____ [ ]

REMEDIAL WORK [X]

COMMENCE DRILLING OPNS. [ ]

CASING TEST AND CEMENT JOB [ ]

OTHER _____

ALTERING CASING [ ]

PLUG AND ABANDONMENT [ ]

[ ]

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. Pulled rods & pump from Glorieta string.
2. Ran Bridge plug in Blinebry scg. Set @ 6565'.
3. Ran perforating gun in Blinebry string. Perforated csg w/2 JSPF @ 6180-85'. No communication. Ran gun in Glorieta string. Perforated scg w/2 JSPF @ 6180-85'. Strings perforated together. OK.
4. Ran rods & pump in Blinebry csg. Returned to prod. using Glorieta string as vent string.
5. On 24 hr test, Pumped 91 BNO & 3 BSW. Gravity 38.7°. GOR 1075.

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 July 9, 1974

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: