

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2080
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

3a. Indicate Type of Lease
 State ☒ Fee ☐
 b. State Oil & Gas Lease No.
 B-1722-1

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 ☐ GAS WELL ☐ OTHER	7. Unit Agreement Name
2. Name of Operator Texaco Producing Inc.	8. Farm or Lease Name NM "N" state
3. Address of Operator P.O. Box 728 Hobbs, Nm 88240	9. Well No. 5
4. Location of Well UNIT LETTER <u>M</u> <u>560</u> FEET FROM THE <u>South</u> LINE AND <u>560</u> FEET FROM THE <u>West</u> LINE, SECTION <u>30</u> TOWNSHIP <u>17S</u> RANGE <u>35E</u> 34E NMPM.	10. Field and Pool, or Wildcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, GR, etc.) 3989' GR	12. County Lea

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

PERFORM REMEDIAL WORK ☐
 TEMPORARILY ABANDON ☐
 PULL OR ALTER CASING ☐
 OTHER Additionally perforate Glorieta ☒

PLUG AND ABANDON ☐
 CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
 COMMENCE DRILLING OPER. ☐
 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. Rig up pulling unit. Pull rods
2. Fish stuck 2 1/16" tubing
3. Perforate Glorieta 2spf at 6077, 93, 97, 6104, 06, 09, 35, 65, 73, 6215, 17, 32.
4. TIH w/ pkr.
5. Acidize Glorieta perms 6004-6232 w/ 5000 gal 15% HCl.
6. Pull pkr.
7. Run 2 1/16" tbg, rods, and pump. Return to production.

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

SIGNED A. Gernandt TITLE Area Superintendent DATE _____
 A. Gernandt 393-4031
 ORIGINAL SIGNED BY JERRY SEXTON
 DISTRICT SUPERVISOR TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 15 1988

OCD
HOBBS OFFICE