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## State of New Mexico

Form C-103

o Appropriate District Office	Energ inerals and N	latural Resources Department		orm C-103 Revised 1-1-89
DISTRICT I	OIL CONSERV	ATION DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240		Box 2088	30-025-20943	
DISTRICT II P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088			5. Indicate Type of Lease	
DISTRICT III			STATE 🔀	FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil / Gas Lease No. B-1722-1	
SUNDRY NOT	ICES AND REPORTS (	ON WELL	D-1122-1	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"			7. Lease Name or Unit Agreement N	
(FORM C	-101) FOR SUCH PROPOS	SALS.)	VACUUM GLORIETA WEST UNIT	
1. Type of Well: OIL GAS WELL WELL	OTHER			
2. Name of Operator TEXACO EXP	LORATION & PRODUCTION	ON INC.	8. Well No. 26	
	, HOBBS, NM 88240		9. Pool Name or Wildcat VACUUM GLORIETA	
4. Well Location				• • • • • • • • • • • • • • • • • • • •
Unit Letter <u>E : 1800</u> Feet From The <u>NORTH</u> Line and <u>330</u> Feet From The <u>WEST</u> Line  Section <u>30</u> Township <u>17S</u> Range <u>35E</u> NMPM <u>LEA</u> COUNTY				
Section 30			PMLEA_COU	NTY
10. Elevation (Show whether DF, RKB, RT,GR, etc.) 4001' DF				
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION		1	BSEQUENT REPORT OF	:•
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPER		MENT
PULL OR ALTER CASING		CASING TEST AND CEMEN	T JOB	
OTHER: ADD PAY AT	ND ACIDIZE	OTHER:		
12. 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. MIRU. TOH W/ RODS, TBG, & PMP.	C/O TO 6200'.			
2. RUN GR/CORRELATION LOG. PERF	F W/ 2 SPF FR 6056'-6132'	(77 FT - 154 HLES).		
<ol> <li>LOAD BS W/ FW, TEST TO 300 PSI FOR 30 MIN &amp; OBTAIN CHART. ACIDIZE PERFS W/ 5000 GALS 15% NEFE HCL, MAX P= 3000 PSI, AIR = 3 BPM. SI 1 HR. SWAB BACK.</li> </ol>				
4. SCALED SQZ W/ 1 DRUM TH-793 IN 10 BFW, OVERFLUSH W/ 150 BFW. TOH W/ PKR.				
5. TIH W/ RODS, TBG, & PMP. RETURN WELL TO PRODUCTION.				
hereby certify that the information above is true and configlete	to the best of my knowledge and belief.			
SIGNATURE Month Com	TITLE	Engr Asst	DATE 8/15/94	1
TYPE OR PRINT NAME MON	te C. Duncan			-0418
(This space for State Use)		CARROLATE STATE OF THE	ALIO	£ () 400.
APPROVED BY	TITLE	protessor Laborated	<b>Δ</b> 1115	16 1994
CONDITIONS OF APPROVAL, IF ANY:		and the second s	Committee Commit	<del></del>
		-	DeSoto/Nichols 12-93 ver	1.0

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