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NEW MEXICO OIL CONSERVATION COMMISSION

MAY 5 9 47 AM '67

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. State - K-4772

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. "DE" State
3. Address of Operator P. O. Box 728 - Hobbs, New Mexico	9. Well No. 3
4. Location of Well UNIT LETTER C 1902 FEET FROM THE West LINE AND 660 FEET FROM THE North LINE, SECTION 18 TOWNSHIP 17-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Midway Abo
15. Elevation (Show whether DF, RT, GR, etc.) 3820' (D. F.)	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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" 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 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.

We propose to Temporarily Abandon subject well effective 7:00 A. M. May 1, 1967. This well will be held for Secondary Recovery for a period of time, and the proper notices will be filed with the New Mexico Oil Conservation Commission.

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

SIGNED J. G. Blevins, Jr. TITLE Assistant District Supt. DATE May 4, 1967
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: