

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
3. State Oil & Gas Lease No.	
E-8712	
4. Unit Agreement Name	
North Vacuum	
Abo West Unit	
5. Well No.	
17	
10. Field and Pool, or Wildcat	
North Vacuum Abo	
12. County	
Lea	

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.)

OIL WELL ☐ GAS WELL ☐ OTHER- WATER INJECTION

1. Name of Operator
TEXACO Inc.

1. Address of Operator
P. O. Box 728, Hobbs, New Mexico 88240

1. Location of Well
UNIT LETTER H 1852 FEET FROM THE North LINE AND 554 FEET FROM
THE East LINE, SECTION 28 TOWNSHIP 17-S RANGE 34-E NMPM.

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

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 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 JOB <input type="checkbox"/>	OTHER <u>CONVERT TO INJECTION</u> <input checked="" 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.

CHANGE OF STATUS FROM SHUT-IN WATER INJECTION TO WATER INJECTION

1-22-85.

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

SIGNED <u>W.B. Loh</u>	TITLE <u>Dist. Opr. Mgr.</u>	DATE <u>1-24-85</u>
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	TITLE _____	DATE <u>JAN 28 1985</u>
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED

JAN 25 1985

O.C.D.
HOSBIS OFFICE