

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
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.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name NCT-2
3. Address of Operator P.O. Box 728 - Hobbs, New Mexico 88240	9. Well No. 20
4. Location of Well UNIT LETTER J , 2080 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 33 TOWNSHIP 17S RANGE 34E NMPM.	10. Field and Pool, or Wildcat Vacuum Abo North
15. Elevation (Show whether DF, RT, GR, etc.) 4059' GR	12. County Lea

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 checked="" type="checkbox"/>	OTHER <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.

T.D. 8900'

8-5/8" casing set @ 1620'

Ran 8888' (275 Joints) 5-1/2" casing set at 8900'.

Cemented w/100 sx Class 'C', 1800 sx Class 'C' 12% Gel, & 250 sx Class C cement w/10# salt/sx. Complete 5:30 A.M. 5-14-72.

Tested 5-1/2" casing w/2000# from 7:30-8:00 A.M. 5-18-72. Tested O.K.

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

SIGNED  TITLE **Assistant District Superintendent** DATE **May 19, 1972**

APPROVED BY **Joe D. Ramey** TITLE **Dist. 1, Supv.** DATE **MAY 22 1972**

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

MAY 18 1972

OIL CONSERVATION COMM.
HOBBS, N. M.

RECEIVED
MAY 18 1972
HOBBS, N. M.