

C 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.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
3. State Oil & Gas Lease No.	

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 type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Water Injection</u>		7. Unit Agreement Name <u>North Vacuum</u> <u>Abo West Unit</u>
2. Name of Operator <u>TEXACO Inc.</u>		8. Form of Lease Name <u>North Vacuum,</u> <u>Abo West Unit</u>
3. Address of Operator <u>P. O. Box 728, Hobbs, New Mexico 88240</u>		9. Well No. <u>2</u>
4. Location of Well UNIT LETTER <u>F</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>15</u> TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> NMPH.		10. Field and Pool, or Wildcat <u>North Vacuum Abo</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>4051' (GR)</u>		12. County <u>Lea</u>

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 PLANNING <input type="checkbox"/>	COMMENCE DRILLING OPERATIONS <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 1-2285.

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

SIGNED W.B. Loh TITLE Dist. Opr. Mgr. DATE 1-24-85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISORDATE JAN 28 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 25 1985

O.C.D.
HOBBS OFFICE