State of New Mexico

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Minerals and Natural Resources Department

Form C-103

Ene Revised 1-1-89 DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 3002525085 DISTRICT II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Box Drawer DD, Artesia, NM 88210 FEE [DISTRICT III 6. State Oil / Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 858150 SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT WEST VACUUM UNIT (FORM C-101) FOR SUCH PROPOSALS.) OIL GAS 1. Type of Well: \boxtimes WELL WELL **OTHER** 8. Well No. 2. Name of Operator 51 **TEXACO EXPLORATION & PRODUCTION INC** 3. Address of Operator 9. Pool Name or Wildcat 205 E. Bender, HOBBS, NM 88240 VACUUM GRAYBURG SAN ANDRES 4. Well Location 1360 Feet From The SOUTH Line and 150 Feet From The EAST Township 17S Section 33 __ Range __ <u>34E</u>_ NMPM . LEA COUNTY 10. Elevation (Show whether DF, RKB, RT,GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING **CHANGE PLANS** COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT **TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** OTHER: Return to production OTHER: 1. Move in and rig up pulling unit.

12.	Describe Proposed or	Completed	Operations	(Clearly state	all pertinen	t details,	and give	e pertinent	dates,	including estimated	date of	starting
	any proposed work) S	SEE RULE 1	103.									-

- 2. TIH with 4 3/4" bit and drill out to 4760' (PBTD).
- 3. TIH with 3 1/2" frac tbg and 5 1/2" Pkr.
- 4. Set Pkr @ 4400'. Frac perfs 4515-4717'.
- 5. Clean out to 4760' and return well to production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TITLE Prod. Engineer	DATE May (0, 97		
TYPE OR PRINT NAME M. Siamak Safargar	Telephone No. 397-0429		
(This space for State Use) CRIGINAL SIGNED BY CHEIS WILLIAMS	1. a 5 4 42		
APPROVED BY DISTRIBUTED SUPERVISOR TITLE	DATE		
CONDITIONS OF APPROVAL IF ANY			

