Submit 3 copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DeSoto/Nichols 12-93 ver 1.0

District Office	Neviseu 1-1-05
OIL CONSERVATION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088	30-025-25703
DISTRICT II Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE ☑ FEE □
P.O. Box Drawer DD, Artesia, NM 88210	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil / Gas Lease No. 857943
SUNDRY NOTICES AND REPORTS ON WELL	
I VIDO NOT LISE 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" (FORM C-101) FOR SUCH PROPOSALS.)	CENTRAL VACUUM UNIT
265 — 10	
1. Type of Well: OIL GAS OTHER INJECTION	
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	8. Well No. 40
	9. Pool Name or Wildcat
3. Address of Operator 205 E. Bender, HOBBS, NM 88240	VACUUM GRAYBURG SAN ANDRES
4. Well Location	
Unit Letter <u>D</u> : <u>42</u> Feet From The <u>NORTH</u> Line and <u>1247</u>	Feet From TheWESTLine
Section 36 Township 17S Range 34E N	MPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT,GR, etc.)	
11. Check Appropriate Box to Indicate Nature of Notice, Repo	rt, or Other Data
	UBSEQUENT REPORT OF:
NOTICE OF INTENTION TO:	☐ ALTERING CASING ☐
PERFORM REMEDIAL WORK	
TEMPORARILY ABANDON L.	
PULL OR ALTER CASING CASING TEST AND CEMI	EN I JOB
OTHER: ADD PAY & ACIDIZE OTHER:	
THE INTENDED PROCEDURE IS ATTACHED.	
I hereby certify that the information above is due and complete to the best of my knowledge and belief. SIGNATURE TITLE Engineering Assistant TYPE OR PRINT NAME J. Denise Leake	DATE11/16/98 Telephone No. 397-0405
TITLE	DATE
- APPROVED BY	

10. Have gang tie in new injection riser. Return to injection.

CONDITIONS OF APPROVAL, IF ANY:

11. Set up and run injection profile 1 week after injection begins.