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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: B-1565

## 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. OIL WELL [ ] GAS WELL [ ] OTHER- Water Injection

7. Unit Agreement Name: Central Vacuum Unit

2. Name of Operator: TEXACO Inc.

8. Farm or Lease Name: Central Vacuum Unit

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

9. Well No.: 43

4. Location of Well: UNIT LETTER A, 35 FEET FROM THE North LINE AND 127 FEET FROM THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat: Vacuum Grayburg San Andres

15. Elevation (Show whether DF, RT, GR, etc.): 3991' (GR)

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|---|---|
| PERFORM REMEDIAL WORK [ ] | PLUG AND ABANDON [ ] | REMEDIAL WORK [ ] | ALTERING CASING [ ] |
| TEMPORARILY ABANDON [ ] | | COMMENCE DRILLING OPNS. [ ] | PLUG AND ABANDONMENT [ ] |
| PULL OR ALTER CASING [ ] | CHANGE PLANS [ ] | CASING TEST AND CEMENT JOB [ ] | |
| OTHER [ ] | | OTHER [ ] | |

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.

TOTAL DEPTH 4800'
8-5/8" OD 24# K-55 Csg Set @ 403'

1. Ran 4790' (110) Jts) 4-1/2" OD 10.5# K-55 Csg & set @ 4800'.
2. Cemented w/2300 sx LW Cement containing 15# salt & 1/4# Flocele/sx. Followed w/200 sx Class 'C' cement containing 8# salt & 1/4# Flocele/sx. Cement circulated. Job complete 4:45 PM 1-16-78 WOC in excess of 18 hrs.
3. Tested 4-1/2" csg w/1000# for 30 minutes, 6:00-6:30 PM., 1-21-78. Tested OK. Job complete 6:30 PM 1-21-78.

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

SIGNED [signature] TITLE Asst. Dist. Supt. DATE 2-7-78

FEB 8 1978

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: