

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-25707
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-1334
7. Lease Name or Unit Agreement Name Central Vacuum Unit
8. Well No. 60
9. Pool name or Wildcat Vacuum Grayburg San Andres

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. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Water Injection	
2. Name of Operator Texaco Producing Inc.	
3. Address of Operator P.O. Box 730, Hobbs, NM 88240	
4. Well Location Unit Letter C : 1310 Feet From The North Line and 2535 Feet From The West Line Section 31 Township 17S Range 35E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3979' GR	

11. 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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: ☐	

12. 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.

11/01/90 thru 11/13/90

- 1) MIRU PU. NU BOP. TOH w/Inj Pkr.
- 2) TIH w/bit. C/O to 4748'. Spt 250 gals 440 NA Perborate.
- 3) Perf 4.5# csg w/2 JSPI @ 4377,4414,35,4666,74,76,95,99,4708,4712'. (10 Int/20 Holes)
- 4) TIH w/pkr. Spt 500 gals 15% NEFE & 30 gals checkersol - 250 gal NA Perborate.
- 5) Acidize perfs 4377-4712' w/4500 gals 15% NEFE 2500# RS & 54 1.3 BS. Max P-1700#. Min P-650#. AIR 3 BPM. ISIP-1000#. 15 Min-500#. TOH w/WS.
- 6) TIH w/pkr & tbg. Cir hole w/pkr fld. Set pkr @ 4332'. Test csg 30 mins. O.K.
- 7) Returned to injection.

Test Prior - 607 BW @ 875 psi, Test After - 866 BW @ 910 psi

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

SIGNATURE Richard DeSoto TITLE Engineering Technician DATE 11/30/90

TYPE OR PRINT NAME R. B. DeSoto

TELEPHONE NO. 393-7191

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: