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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old C-102 and C-103
Effective 14-65

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

5. State Oil & Gas Lease No.: B-155

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 —" 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.: 72

4. Location of Well: UNIT LETTER E, 2630 FEET FROM THE North LINE AND 1310 FEET FROM THE West 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.): 4006' (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 [x]	
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'
9 5/8" OD 40# H-80 Csg set @ 327'

1. Ran 4788' (110 Jts.) 4 1/2" OD 10.5# K-55 Csg and set @ 4800'.
2. Cemented w/2000 SX LW Cement containing 15# salt & 1/4# Flocele per sack followed w/200 SX Class 'C' Cement containing 8# salt/SX. Cement circulated. Job complete 6:55 P.M., 1-30-78. WOC in excess of 18 Hrs.
3. Tested 4 1/2" OD Csg w/1000# for 30 minutes, 4:00 - 4:30 P.M., 2-3-78, Tested OK. Job complete 4:30 P.M., 2-3-78.

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 2-10-78

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: