STATE OF NEW MEXICO
ERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease: State [XX] 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 —" (FORM C-101) FOR SUCH PROPOSALS.)

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

7. Unit Agreement Name: Central Vacuum Unit

Name of Operator: TEXACO, Inc.

8. Farm or Lease Name:

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

9. Well No.: 73

Location of Well: UNIT LETTER H, 2630 FEET FROM THE North LINE AND 142 FEET FROM THE East LINE, SECTION 36, TOWNSHIP 17S, RANGE 34E, NMPM.

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

15. Elevation (Show whether DF, RT, GR, etc.): 3985' (GRP

12. County: Lea

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

NOTICE OF INTENTION TO:

FORM REMEDIAL WORK [ ]
IPORARILY ABANDON [ ]
L OR ALTER CASING [ ]
PLUG AND ABANDON [ ]
CHANGE PLANS [ ]
OTHER [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [XX]
COMMENCE DRILLING OPNS. [ ]
CASING TEST AND CEMENT JOB [ ]
ALTERING CASING [ ]
PLUG AND ABANDONMENT [ ]
OTHER [ ]

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.

1. Rigged up. Installed BOP. Pulled tbg. & pkr.
2. Spotted 1/2 DR bleach mix in 20 BFW.
3. Perfed 4 1/2" csg. with 2 JSPI at 4368, 73, 81, 95, 4405, 18, 28, 36, 64, 75, 4503, 13, 38, 46, 54, 64, 75, 89, 4608 14, 36, 48 and with 4 JSPI at 4368, 4513'. (24 intervals, 50 shots). Well communicated.
4. Acidized 4538-4712' with 6000 gal. 20% gelled NEFE and 1500# RS.
5. Acidized 4368-4513' with 3000 gal. 20% gelled NEFE and 500# RS.
6. Ran 2 3/8" Ind. tbg. and set pkr. at 4301'. Loaded annulus with inhibited water.
7. Return to injection 4/26/85.

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

SIGNED W. B. [illegible] TITLE Dist. Opr. Mgr. DATE May 3, 1985

APPROVED BY [illegible] TITLE [ ] DATE MAY 9 1985

CONDITIONS OF APPROVAL, IF ANY: