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NEW MEXICO OIL CONSERVATION COMMISSION

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

SUNDRY NOTICES AND REPORTS ON WELLS DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.		5a. Indicate Type of Lease State ☒ Fee ☐ 5. State Oil & Gas Lease No. D-155
1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER- WATER INJECTION		7. Unit Agreement Name Central Vacuum Unit
2. Name of Operator TLXACO Inc.		8. Farm or Lease Name Central Vacuum Unit
3. Address of Operator P. O. BOX 728, HOOBBS, NEW MEXICO 88240		9. Well No. 73
4. Location of Well UNIT LETTER H 2630 FEET FROM THE North LINE AND 142 FEET FROM THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E N.M.P.M.		10. Field and Pool, or Wildcat Vacuum Grayburg San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3985' (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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☒	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# K-55 Csg Set @ 460'

1. Ran 4790' (100 Jts.) 4 1/2" OD 10.5# K-55 Csg @ 4600'.
2. Cemented w/2000 sx. L# cement containing 15# salt & 1/4# Floccle per sack.
Followed w/200 sx. Class 'C' cement containing 8# salt & 1/4# Floccle per sx.
Cement circulated. Job complete 2:45 P.M., 2-3-78. 100 in excess of 18 Hrs.
3. Tested 4 1/2" Csg w/1000# for 30 minutes. 10:00 - 10:30 A.M., 2-14-78. Tested OK.
Job complete 10:30 A.M., 2-14-78.

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 2-24-78

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY: