## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

42. OF COPIES RECEIVED	<u> </u>	
DISTRIBUTION		
SANTA FE		
FILE		
U.3.0.5.		
LAND OFFICE		
OPERATOR	1	

## OIL CONSERVATION DIVISION

Form C-103 -

DISTRIBUTION	P. O. BOX 2	2088	Revised 10-1-78
SANTA FE	SANTA FE, NEW M	EXICO 87501	
FILE	4		ba. Indicate Type of Lease
U.3.G.S.	4		State T Fee
OPERATOR			5, State Oil & Gas Lease No.
O' ENATOR	J		B-1578
CUIDE	W MOTICES AND DEPORTS ON WE	T1 1 C	
NUNUC DAG BOG MADO EINT BEU TON OOL	RY NOTICES AND REPORTS ON WE OPPOSALS TO DRILL OR TO DEEPEN OF PLUS BACK TOOR PER SHEET IN FOR SUCH PORTS OF THE PER SHEET IN FOR PER SHEET IN FOR S	TLLD	
	TION FOR PERMIT -" (FORM C-101) FOR SUCH P	HOPOSACS.)	/, Unit Agreement Name
1, OIL	Maken Tedenta		d + 3 77 77
WELL WELL	OTHER- Water Injection	OH .	Gentral Vacuum Unit
2. Name of Operator			1
TEXACO Inc.			Central Vacuum Unit
3. Address of Operator		Coalia	_
	Hobbs, New Mexico	88240	10, Field and Pool, or Wildcat
4. Location of Well			Vacuum Grayburg
UNIT LETTER	310 FEET FROM THE North	LINE AND 2560 FEET FF	Vacuum Grayburg
THE West LINE, SECTI	on 30 TOWNSHIP 17-S	HANGE 35-E NM	
THE LINE, SECTI	10masare		
THITTINITE !	15. Elevation (Show whether DF	F, RT, GR, etc.)	12. County
	///// 3986' (GR	()	I ea ()))))))
			Other Data
	Appropriate Box To Indicate Nat		
NOTICE OF I	NTENTION TO:	SUBSEQUE	ENT REPORT OF:
,,,,,,		· · · · · · · · · · · · · · · · · · ·	
PERFORM REMEDIAL WORK	PLUG AND ABANDON R	REMEDIAL WORK	ALTERING CASING
TEMPORATILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	ASING TEST AND CEMENT JOB	
		other Repair tubi	ng leak X
OTHER			
		The second secon	line estimated date of starting any proposed
17. Describe Proposed or Completed O work) SEE RULE 1103.	perations (Clearly state all perlinent aeralis	s, and give pertinent dates, includ	ling estimated date of starting any proposed
work) sac note that			
<ol> <li>Rigged up.</li> </ol>	Pull tubing % packer.		
2. Reran new pa	cker & replaced seals	in tubing collars	. Set pkr. @ 4391'.
3. Tested tubin	ig-casing annulus to 10	000# for 30 minute	s, 5:00 - 5:30 PM.
9-14-81.	Tested OK.	· -	, ,
4. Return well	to water injection.		
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8. I hereby certify that the informatio	n above is true and complete to the best of r	my knowledge and belief.	
.8.1 hereby certify that the information	n above is true and complete to the best of r	my knowledge and belief.	
8.1 hereby certify that the information	//		nar 9-18-81
8. 1 hereby certify that the informatio	//	my knowledge and belief.	DATE <u>9-18-81</u>
8.1 hereby certify that the informatio	TITLE ASS		
B. 1 hereby certify that the information	TITLE ASS		
8. 1 hereby certify that the information in the information is the information in the inf	TITLE ASS		DATE 9-18-81 SEP 21 1983