

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State ☒	Fee ☐

5. State Oil & Gas Lease No.
B-1578

7. Unit Agreement Name
Central Vacuum Unit

8. Farm or Lease Name
Central Vacuum Unit

9. Well No.
6

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

11. County
Lea

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. OIL WELL ☐	GAS WELL ☐	OTHER - Water Injection
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2. Name of Operator
TEXACO Inc.

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

4. Location of Well
UNIT LETTER C 1310 FEET FROM THE North LINE AND 2560 FEET FROM

THE West LINE, SECTION 30 TOWNSHIP 17-S RANGE 35-E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
3986' (GR)

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
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NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐
PULL OR ALTER CASING ☐	OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOBS ☐	OTHER Perforate & Treat ☒

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 4830'
Plug Back Total Depth 4794'
8 5/8" OD 24# K-55 Csg set @ 410'
4 1/2" OD 10.5# K-55 Csg set @ 4830'

1. Perforate 4 1/2" csg w/2-JSPF @ 4524', 32', 40', 46', 57', 68', 78', 89', 93', 4604', 08', 12', 20', 26', 31', 35' & 4647'.
2. Set pkr. @ 4421'. Acidize perforations 4524' - 4647' w/6800 gal. 15% NE Acid in 2-stages using 800# rock salt between stages.
3. Ran 2 3/8" OD plastic coated tubing w/pkr. & set @ 4396'. Load annulus w/inhibited water.
4. Well completed Shut-In Water Injection 3-8-79.

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

SIGNED *J. C. Chaffin*

TITLE **Asst. Dist. Supt.**

DATE **3-19-79**

APPROVED BY *J. C. Chaffin*

TITLE Asst. Dist. Supt.

DATE **MAR 22 1979**

CONDITIONS OF APPROVAL, IF ANY: