

Submit 3 copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-25811

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

B-1722

7. Lease Name or Unit Agreement Name

CENTRAL VACUUM UNIT

8. Well No.

14

9. Pool Name or Wildcat

VACUUM GRAYBURG SAN ANDRES

SUNDRY NOTICES AND REPORTS ON WELL
(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. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER WATER INJECTION WELL

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
205 E. Bender, HOBBS, NM 88240

4. Well Location

Unit Letter E : 2630 Feet From The NORTH Line and 1238 Feet From The WEST Line

Section 30 Township 17S Range 35E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3990' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

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 OPERATION ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐ REPAIRED INJ PACKER AND TESTED CASING ☒

12. 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.

10/28/96

1. MIRU. RELEASED INJECTION PKR & TOH W/ INJ EQUIP.

2. TIH W/ 2 3/8" RICE DUO-LINE TUBING STRING AND 4 1/2" REPAIRED AD-1INJ PKR, CIRCD HOLE W/ PKR FLUID, SET PKR @ 4365'.

3. TESTED 4 1/2" CASING FROM SURFACE TO PKR SET @ 4365' AS PER NMOC D GUIDELINES TO 480# FOR 30 MINUTES, HELD OK.

4. RETURNED WELL TO INJECTION.

(ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)

(INTERNAL TEPI STATUS REMAINS: INJ)

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

SIGNATURE Monte C. Duncan TITLE Engr Asst

DATE 10/29/96

TYPE OR PRINT NAME Monte C. Duncan

Telephone No. 397-0418

(This space for State Use)

APPROVED BY Monte C. Duncan TITLE Engr Asst

DATE NOV 04 1996

1998
received
Hobbs
OCD

