to Appropriate District Office

Energy, Minerals and Natural Resources Departme

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. 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.
30-025-25812

5. Indicate Type of Lease STATE [XX] FEE [ ]

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

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.)

7. Lease Name or Unit Agreement Name
Central Vacuum Unit

1. Type of Well:
OIL WELL [ ] GAS WELL [ ] OTHER Injection

2. Name of Operator
Texaco Producing Inc.

8. Well No.
15

3. Address of Operator
P.O. Box 730, Hobbs, NM 88240

9. Pool name or Wildcat
Vacuum Grayburg San Andres

4. Well Location
Unit Letter F : 2630 Feet From The North Line and 2560 Feet From The West Line

Section 30 Township 17S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3984' GR

11. 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 [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		OTHER: OCD required casing repair [X]	

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. 11/05/90 thru 11/25/90

1) MIRU PU. NU BOP. TOH w/tbg & inj pkr. TIH w/RBP, pkr & 2.375 WS to 2590'.
2) Set RBP @ 4700'. Test. Loc csg leak @ 634-718'. Spt sand on plug.
3) Sqz csg leak @ 634-718' w/200 sx Cl C w/2% CACL. Max P-600#.
4) Drlg cmt 512-718'. No test.
5) Sqz leak 634-718' w/200 sx Cl C w/2% CACL. Max P-500#.
6) Drlg cmt 514-690'. No test.
7) Sqz w/30 sx Thix set 1500 psi.
8) Drlg cmt 340-768'. Test 500 psi. O.K. TOH w/RBP.
9) C/O to TD 4810'. Spt 300 gals 4% NA Perborate across perfs 4508-4787'. TOH.
10) TIH w/pkr set @ 4047'. A/perfs w/3000 gals 15% NEFE 1500# RS & 50 BS's. Max P-2700#. Min P-1000#. AIR 3 BPM. ISIP-1400#. 15 Min-850#. TOH w/WS.
11) TIH w/AD-1, inj tbg. Cir pkr fld. Test. O.K.
12) Returned to injection.

Prior - 166 BW @ 900 psi. After - 250 BW @ 1020 psi.

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

SIGNATURE Richard DeSoto TITLE Engineering Technician DATE 12/07/90

TYPE OR PRINT NAME R. B. DeSoto TELEPHONE NO. 393-7191

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: