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LAND OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1056	

## 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.  
SEE APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- <input checked="" type="checkbox"/> WATER INJECTION
1. Name of Operator		
TEXACO Inc.		
2. Address of Operator		
P. O. BOX 728, HOBBS, NEW MEXICO 88240		
3. Location of Well		
UNIT LETTER <u>P</u>	<u>1230</u> FEET FROM THE <u>South</u> LINE AND <u>159</u> FEET FROM	
THE <u>East</u> LINE, SECTION <u>25</u>	TOWNSHIP <u>17-S</u> RANGE <u>34-E</u> N.M.P.M.	

7. Unit Agreement Name
CENTRAL VACUUM UNIT
8. Farm or Lease Name
CENTRAL VACUUM UNIT
9. Well No.
28
10. Name of Land Owner
VACUUM GRAYBURG SAN ANDRES
11. County
LEA

15. Elevation (Show whether DF, RT, GR, etc.)
3985' (GR)

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

SUBJECT WELL WAS COMPLETED AS SHUT-IN WATER INJECTION  
ON 4-14-78, PENDING COMPLETION OF INJECTION  
FACILITIES. PLEASE BE ADVISED THAT ON 12-17-78,  
WATER INJECTION BEGAN IN SUBJECT WELL.

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 1-23-79

Orig. Signed by  
Jerry Sexton

APPROVED BY Dist 1, Supv.

CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE JAN 26 1979