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	IL CONSERVATION	NOTSTATA M	WEST AND NO
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 DISTRICT II Santa Fe. New Mexico 87504-2088		WELL API NO. 30-025-25817	
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	-		5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. B-2245
SUNDRY NOTICES	AND REPORTS ON WE	LLS	
(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
·	FOR SUCH PROPOSALS.)		- CENTRAL VACOUM UNIT
I. Type of Well: OR. GAS WELL WELL WELL	OTHER WATER	INJECTION	
2. Name of Operator			8. Well No.
Texaco Exploration and Production Inc.			30
3. Address of Operator D. C. Boy, 720 Hobbs NM 98040			9. Pool name or Wildcat
P. O. Box 730 Hobbs, NM 88240 Well Location			VACUUM GRAYBURG SAN ANDRES
	Feet From The SOUTH	Line and	2560 Feet From The WEST Lin
Section 30	Township 17–S I	Cange 35-E	NMPM LEA
Section 30	10wnship 17-5 F		INDER LEN
	3987	' GR	
- 4	ropriate Box to Indicate		•
NOTICE OF INTEN	ITION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. DPLUG AND ABANDONMENT	
PULL OR ALTER CASING			EMENT JOB
OTHER:		OTHER: ADDED PAY	Y AND ACIDIZED
 Describe Proposed or Completed Operational work) SEE RULE 1103. 8/25/93 - 8/31/93 MIRU, TOH W/ INJ EQUIP. C/O PERFD 4 1/2" CSG W/ 2 JSPF 	o'D TO 4797' (PBTD).		ما ما الله الله الله الله الله الله الله
3. ACIDIZED PERFS W/ 5000 GAI	-		BPM.
SWABBED BACK LOAD.	- DVD - 44461		IN OU RETURNED WITH TO THE PROPERTY.
		а 10 570# FOR 30 M	IN, OK. RETURNED WELL TO INJECTION.
(ORIGINAL CHART ATTACHED, CO	OPY OF CHART ON BACK)		
OPT 9-8-93 1452 BWPD @ 1	750 PSI		
			-
I hereby certify that the information above is true and	complete to the best of my knowledge as	nd belief.	
I hereby certify that the information above is true and of the sum		ad belief. TTLE <u>ENGINEER'S AS</u>	SISTANT DATE 10-7-93
That ()	<u> </u>		SISTANT DATE 10-7-93 TELEPHONE NO.393-7191
TYPEOR PRINT NAME MONTE C. DUNCAN	1		TELEPHONE NO.393-7191
TYPE OR PRINT NAME MONTE C. DUNCAN (This space for State Usc) ORIGINAL SIGNIE	1		
TYPE OR PRINT NAME MONTE C. DUNCAN (This space for State Use) ORIGINAL SIGNED DISTRICT IS	D BY JERRY SEXTON	TILE ENGINEER'S AS	<u>телерноме но.</u> 393-7191 ОСТ 12 1993

