

NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. 2-155
7. Unit Agreement Name CENTRAL VACUUM UNIT
8. Farm or Lease Name CENTRAL VACUUM UNIT
9. Well No. 139
10. County LEA

SUNDY 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 INSTRUCTIONS FOR PERMIT FORM C-101 FOR SUCH PROPOSALS.

OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- 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 P. 85 FEET FROM THE South LINE AND 958 FEET FROM THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 34-E N.M.P.M.		

15. Elevation (Show whether DF, RT, GR, etc.) 3986 (GR)
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Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:	
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER COMMENCE WATER INJECTION <input checked="" type="checkbox"/>

17. Description of 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 2-17-79, PENDING COMPLETION OF INJECTION
FACILITIES. PLEASE BE ADVISED THAT ON 5-2-79,
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 5-4-79

APPROVED BY [Signature] TITLE DATE MAY 7 1979

CONDITIONS OF APPROVAL, IF ANY: