

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |  |
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| OPERATOR               |  |

|                                                                                                      |
|------------------------------------------------------------------------------------------------------|
| 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br><b>NM-1021</b>                                                       |

|                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>SUNDY NOTICES AND REPORTS ON WELLS</b><br/>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT WITH FORM C-103" FOR SUCH PROPOSALS.)</p>                                                                                                                                                                                            |                                                                                                                                                                                                                                                                        |
| <p>1. Name of Operator<br/><b>TEXACO Inc.</b></p> <p>2. Address of Operator<br/><b>P.O. Box 728, Hobbs, NM 88240</b></p> <p>3. Location of Well<br/>UNIT LETTER <b>G</b> <b>2465</b> FEET FROM THE <b>North</b> LINE AND <b>1335</b> FEET FROM THE <b>East</b> LINE, SECTION <b>31</b> TOWNSHIP <b>17-S</b> RANGE <b>35-E</b> NMPM.</p> <p>15. Elevation (Show whether DF, RT, GR, etc.)<br/><b>3975' (GR)</b></p> | <p>7. Unit Agreement Name<br/><b>Central Vacuum Unit</b></p> <p>8. Farm or Lease Name<br/><b>Central Vacuum Unit</b></p> <p>9. Well No.<br/><b>146</b></p> <p>10. Field and Pool or Wildcat<br/><b>Vacuum Grayburg-San Andres</b></p> <p>12. County<br/><b>Lea</b></p> |

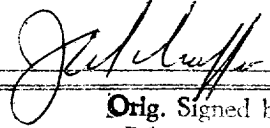
|                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data</p>                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p> | <p>SUBSEQUENT REPORT OF:</p> <p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p> <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p> <p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p> |

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.

**TOTAL DEPTH 1540'**  
**13-3/8" OD 48# H-40 Csg. Set @ 357'**

1. Ran 1530' (39 jts.) 8-5/8" OD 24# K-55 csg & set @ 1540'.
2. Cemented 1200 sx Class "C" cement containing 2% CaCl. Cement circulated. Job complete 6:15 p.m., 7-17-80. WOC in excess of 18 hrs.
3. Tested 8-5/8" csg to 1000# for 30 minutes, 3:00-3:30 a.m., 7-19-80. Job complete 3:30 a.m., 7-19-80.

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

|                                                                                            |                                |                     |
|--------------------------------------------------------------------------------------------|--------------------------------|---------------------|
| SIGNED  | TITLE <b>Asst. Dist. Supt.</b> | DATE <b>7-21-80</b> |
| APPROVED BY <b>John Runyar</b><br>Geologist                                                | TITLE                          | DATE <b>7-21-80</b> |
| CONDITIONS OF APPROVAL, IF ANY:                                                            |                                |                     |