## State of New Mexico

Submit 3 copies to Appropriate District Office

En∈

Form C-103 Revised 1-1-89

CONDITIONS OF APPROVAL, IF ANY:

Minerals and Natural Resources Department

DISTRICT I	OIL CONSERVAT	MOISIVIA MOI			
P.O. Box 1980, Hobbs, NM 88240		WELL API NO. 3002527133			
<u>DISTRICT II</u>	P.O. Box 2088			5. Indicate Type of Lease	
P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088			5. malcate Type of	STATE 🔀	FEE [
DISTRICT III			6. State Oil / Gas L		
1000 Rio Brazos Rd., Aztec, NM 874	······································			858150	
SUNDRY NOTICES AND REPORTS ON WELL  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT					
			7. Lease Name or Unit Agreement Name		
OU	C-101) FOR SUCH PROPOSALS.	)	WEST VACUUM U	UNII	
1. Type of Well: OIL GA WELL WE					
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC			8. Well No.	54	
3. Address of Operator 205 E. Bender, HOBBS, NM 88240			9. Pool Name or Wil		
4. Well Location			L VACUUM G	RAYBURG SAN ANDF	ES
Unit LetterL:	2130 Feet From The SC	OUTH Line and 810	Feet From TheV	WEST Line	
Section 33	Township 17S	_ RangeN	MPM	LEA COUNTY	1
	10. Elevation (Show whether DF,	RKB, RT,GR, etc.)			
11. Check A	Appropriate Box to Indicate I	Nature of Notice, Repor	t or Other Data		
NOTICE OF INTENTION	JBSEQUENT REPORT OF:				
<u></u>	PLUG AND ABANDON	_			-
PERFORM REMEDIAL WORK	<u> </u>	REMEDIAL WORK	<u>—</u>	ERING CASING	
TEMPORARILY ABANDON				т П	
PULL OR ALTER CASING CASING TEST AND CEMENT JOB			MT JOB L		
OTHER: Return	to production	() OTHER:			□
<ol> <li>Describe Proposed or Completed C any proposed work) SEE RULE 110</li> </ol>	perations (Clearly state all pertinate) 03.	ent details, and give pertine	nt dates, including e	estimated date of st	arting
1. Move in and rig up pulling unit.					
2. TIH with 4 3/4" bit and drill out to 4708	(PBTD).				
3. TIH with 3 1/2" frac tbg and 5 1/2" Pkr					
4. Set Pkr @ 4500'. Frac perfs 4650-470	14'.				
5. Clean out to 4708' and return well to pr	oduction.				

I hereby certify that the information above jetter SIGNATURE	ue and complete to the best of my knowledge and belief.  TITLE Prod. Engineer	DATE May 6,97	
TYPE OR PRINT NAME M. Siamak Safargar		Telephone No. 397-0429	
(This space for State Use)	( ) Leave the second of the se		
APPROVED BY	TITLE	DATE 14 107	

