STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: B-871

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. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name: West Vacuum Unit

2. Name of Operator: Texaco Inc.

8. Farm or Lease Name: West Vacuum Unit

3. Address of Operator: P. O. Box 728, Hobbs, New Mexico 88240

9. Well No.: 54

4. Location of Well: UNIT LETTER L, 2130 FEET FROM THE South LINE AND 810 FEET FROM THE West LINE, SECTION 33 TOWNSHIP 17-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat: Vacuum Grayburg San Andres

15. Elevation (Show whether DF, RT, GR, etc.): 4047' (GR)

12. County: Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER Perforate & Treat [X]	

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 4750'
PLUG BACK TOTAL DEPTH 4708'
11 3/4" OD 42# H-40 Csg set @ 365'
8 5/8" OD 24# K-55 Csg set @1610'
5 1/2" OD 15.5# J-55 Csg set @ 4750'

1. Perforate 5 1/2" Csg. w/2-JSPF @ 4650', 53', 64', 68', 72', 84', 88', 92', 96', 4700' & 4704'.
2. Set pkr @ 4451'. Acidize perfs. 4650'-4704' w/4400 gals. 15% NEFE Acid & 44 Ball sealers.
3. Install pumping equipment. On 24 hour potential test, ending 2/25/81, well pumped 4 BO, 131 BW, & GOR 708.

18. 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 2/27/81

APPROVED BY [signature] TITLE SUPERVISOR, DISTRICT II DATE MAR 3 1981

CONDITIONS OF APPROVAL, IF ANY: