## State of New Mexic

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CONDITIONS OF APPROVAL, IF ANY:

## Fnergy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION    Do. 00 to 1990, Hobbs, NM 88240   Santa Fe, New Mexico 87504-2088   S. Indicate Type of Lesse No. 2075877238   S. Indicate T	o Appropriate District Office	Energy, Milierals and Had	urat tresources below	Kevised 1-	
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 SISTRECT II P.O. Box Drawer DD, Artesia, NM 88210 Santa FC, New Mexico 87504-2088 SISTRECT II O. State Of J Gat Least NG SISTRECT III O. State Of J Gat Least NG	DISTRICT I	OIL CONSERVA	ATION DIVISION	WELL API NO.	
SETRICT III  - 0. Box Drever DD, Artesia, NM 89210  - 0. Stete Of Gra Learn No.  - 0. Stete Of Gra Lear	P.O. Box 1980, Hobbs, NM 88240			3002527236	
9. State Of Jas Lease No. 35100   Street Of Jas Lease No. 10561   Street Of Jas Lease No. 1056	DISTRICT II	Santa Fe. New M		5. Indicate Type of Lease STATE FEE	
DOD RIG Briston Rid, Artice, NM 87410   SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL FOR TO BEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR, USE "APPLICATION FOR PRIVATE" (FORM C-10) FOR SUCH PROPOSALS.)   The poll was "OK WELL OTHER CONTINUED AND PROPOSALS.)   The poll was "WELL OTHER CONTINUED AND PROPOSALS.)   Township 17-S Range 34-E NMPM LEA COUNTY		:10			
(DO NOT USE THIS FORM FOR PROPOSALS TO BUILD ON TO DETAIL OR THUS BACK TO A DIFFERENT RESERVOIR PROPOSALS TO BUILD ON TO DETAIL OR TO D		10		B-1056-1	*******
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.  3. Address of Operator P.O. BOX 730, HOBBS, NM 85240  4. Well Losation Unit Letter J: 2310 Feet From The SOUTH Line and 2308 Feet From The EAST UACUUM GLORETA  Sociolo 22 Township, 17-8 Range 24E NMPM LEA COUNTY  Sociolo 25 Township, 17-8 Range 24E NMPM LEA COUNTY  Sociolo 25 Township, 17-8 Range 24E NMPM LEA COUNTY  SOCIOLO 25 TOWNSHIP TO SOUTH Line and 2308 Feet From The EAST Unit Line and 2308 Feet From The EAST Unit Line and 2308 Feet From The LATER COUNTY  SOCIOLO 25 TOWNSHIP TO SOUTH LINE and 2308 Feet From The EAST UNIT LINE AND SOUTH LINE and 2308 Feet From The EAST UNIT LINE AND SOUTH LINE and 2308 Feet From The EAST UNIT LINE AND SOUTH LINE and 2308 Feet From The EAST UNIT LINE AND SOUTH LINE and 2308 Feet From The EAST UNIT LINE AND SOUTH LINE AND SOUT	SUNDRY NO (DO NOT USE THIS FORM FOR PRO	TICES AND REPORTS ON OPOSALS TO DRILL OR TO DI PRIVOIR USE "APPLICATION	FOR PERMIT"		
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.  3. Address of Operator P. D. BOX 730, HOBBS, NM 88240  4. Well Location Unit Letter J: 2310 Feet From The SOUTH Line and 2306 Feet From The EAST Line Unit Letter J: 2310 Feet From The SOUTH Line and 2306 Feet From The EAST Line LEA COUNTY  Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PILL OR ALTERNO CASING FEED AND ARMADON FILL OR ALTERNO CASING FILL OR ALTERNO FI					
3. Address of Operator P.O. BOX 730, HOBBS, NM 88240 VACUUM GLORIETA 4. Well Location Unit Letter J.: 2310 Feet From The SOUTH Line and 2308 Feet From The EAST Line Sociology 25 Township 17-S Range 34-E NMPM LEA COUNTY    Common County	2. Name of Operator TEXACO EX	(PLORATION & PRODUCTION	1 INC.	35	
Unit Letter J: 2310 Feet From The SOUTH. Line and 2308 Feet From The Section 25 Township 17-8 Range 34-E NMPM LEA, COUNTY	3. Address of Operator P.O. BOX 7	30, HOBBS, NM 88240			
Section55		2310 Feet From The	SOUTH Line and 2308	Feet From TheEASTLine	
10. Elevation (Show whether DF, RKE, RT,GR, atc.) 3998' GR  11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK				MPMLEA_COUNTY	
NOTICE OF INTENTION TO:  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK	Section			2	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK	11 Charle				
PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OFFERTION   PLUG AND ABANDONMENT   PLUG AND ABANDONMENT   CASING TEST AND CEMENT JOB   OTHER:   CASING INTEGRITY TEST   MILES   MI			S	UBSEQUENT REPORT OF:	
COMMENCE DRILLING OPERATION   PLUG AND ABANDONMENT   TEMPORARILLY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPERATION   PLUG AND ABANDONMENT   CASING TEST AND CEMENT JOB   OTHER: CASING INTEGRITY TEST   SO THER: CASING INTEGRITY TEST   SO THERE IN THE SOUTH OF THE WELL TO THE WELL TO HAVE PRODUCTION EQUIPMENT.  2. THE WAY PACKER & SET @ 6169'. TESTED 5 1/2" CASING FROM SURFACE TO PACKER SET @ 6169' AS PER NMOCD GUIDELINES TO 300% FOR 30 MINUTES, HELD OK.  3. TOH WAY PACKER. THE WAY PRODUCTION EQUIPMENT & RETURNED WELL TO PRODUCTION.  (ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)  THE ENGRY ABANDON   PLUG AND ABANDONMENT   PLUG AND ABANDONMENT   DATE   6/28/94    TITLE ENGRAPS TO THE WELL TO THE SAME T	NOTICE OF INTENT			<b></b>	
TOTHER:  CASING TEST AND CEMENT JOB  OTHER:  CASING INTEGRITY TEST  CASING TEST AND CEMENT TEST  CASING INTEGRITY TEST  CASING TEST AND CEMENT TEST  CASING INTEGRITY TEST  CASING TEST AND CEMENT TEST  CASING	PERFORM REMEDIAL WORK			PERATION PLUG AND ABANDONMENT	
OTHER:  CASING INTEGRITY TEST  CASING INTEGRI	TEMPORARILY ABANDON	CHANGE PLANS	<del></del> [	_	
12. 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. 6-11-94  1. NOTIFIED NMOCD OF CASING INTEGRITY TEST TO BE PERFORMED DURING AN EQUIPMENT UPGRADE ON THE WELL. TOH W/ PRODUCTION EQUIPMENT. 2. TIH W/ PACKER & SET @ 6169. TESTED 5 1/2" CASING FROM SURFACE TO PACKER SET @ 6169 AS PER NMOCD GUIDELINES TO 300# FOR 30 MINUTES, HELD OK. 3. TOH W/ PACKER. TIH W/ PRODUCTION EQUIPMENT & RETURNED WELL TO PRODUCTION. (ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)  1-Mentally start the information above is 1000 and Jungfers to the best of my boordadge and bailed. SIGNATURE TITLE Engr Asst DATE 6/28/94  TYPE OR PRINT NAME Monte C. Duncan Telephone No. 397-0418  Orig. Signed by Paul Kautz DATE	PULL OR ALTER CASING		_		$\boxtimes$
6-11-94  1. NOTIFIED NMOCD OF CASING INTEGRITY TEST TO BE PERFORMED DURING AN EQUIPMENT UPGRADE ON THE WELL. TOH W/ PRODUCTION EQUIPMENT.  2. TIH W/ PACKER & SET @ 6169. TESTED 5 1/2° CASING FROM SURFACE TO PACKER SET @ 6169' AS PER NMOCD GUIDELINES TO 300# FOR 30 MINUTES, HELD OK.  3. TOH W/ PACKER. TIH W/ PRODUCTION EQUIPMENT & RETURNED WELL TO PRODUCTION.  (ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK)  I Needly certify that the information above is true and Amplete to the best of my knowledge and balant.  SIGNATURE  TITLE  TITLE  Orig. Signed by Paul Kautz  OATE	OTHER:		_ LJ   OTHER:		
TITLE Engr Asst  Type OR PRINT NAME  Monte C. Duncan  Orig. Signed by Paul Kautz  DATE  DATE  6/28/94  Telephone No. 397-0418	1. NOTIFIED NMOCD OF CASING IN TOH W/ PRODUCTION EQUIPME 2. TIH W/ PACKER & SET @ 6169. FOR 30 MINUTES, HELD OK. 3. TOH W/ PACKER. TIH W/ PRODU	NT. TESTED 5 1 <i>12</i> ° CASING FROM UCTION EQUIPMENT & RETU	I SURFACE TO PACKER SET €	g) 6169' AS PER NMOCD GUIDELINES TO 300	`#
Orig. Signed by  (This space for State Use)  Orig. Signed by  Paul Kautz  DATE  DATE	M+ /	TITLE			
TITLE ON L. DATE	TYPE OR PRINT NAME	Monte C. Duncan			
MET IN CALL IN	(This space for State Use)  APPROVED BY	TITLE_	Paul Ka		1154 ——

