

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

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
-2276

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Water Injection</u>	7. Unit Agreement Name <u>Central Vacuum Unit</u>
2. Name of Operator <u>PEXACO Inc.</u>	8. Farm or Lease Name <u>Central Vacuum Unit</u>
3. Address of Operator <u>P. O. Box 727, Hobbs, New Mexico 88240</u>	9. Well No. <u>157</u>
4. Location of Well UNIT LETTER _____ FEET FROM THE _____ LINE AND _____ FEET FROM THE _____ LINE, SECTION <u>25</u> TOWNSHIP <u>17-S</u> RANGE <u>24-E</u> NMPM.	10. Field and Pool, or Wildcat <u>Central Vacuum Unit, Hobbs, New Mexico</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>400' (RT)</u>	12. County <u>Tara</u>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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 4800'
16" OD 65' H-40 CONDUCTOR SET @ 349'.
11 3/4" OD 42# H-40 CSG SET @ 1350'.

- Run 4790' (116 Wt.) 5 1/2" OD 17' H-55 Csg & Set @ 4800'.
- Cemented W/1700 Sx. IW Cement containing 15% Salt & 1/2% Floccle per sack followed W/300 Sx Class 100 cement containing 1/2% Floccle per sack. Cement Circulated Job complete 3:15 P.M. 11-17-82. WOC in excess of 18 hrs.
- Tested 5 1/2" Csg to 1500 for 30 minutes, 3:15-3:45 P.M. 11-18-82 Tested OK Job Complete 3:45 P.M. 11-18-82.

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

SIGNED Jerry Sexton TITLE Asst. Dist. Dir. DATE 11-18-82

ORIGINAL SIGNED BY JERRY SEXTON TITLE _____ DATE NOV 29 1982

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL DISTRICT SUPER.