y, Minerals and Natural Resources Department

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P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

OIL CONSERVATION DIVISION

P.O. Box 2088

WELL API NO.

30-025-27970

DeSoto/Nichols 12-93 ver 1.0

DISTRICT II	Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease		
P.O. Box Drawer DD, Artesia, NM 88210		STATE ✓ FEE		
DISTRICT III		6. State Oil / Gas Lease No.		
1000 Rio Brazos Rd., Aztec, NM 87410		B-155		
(DO NOT USE THIS FORM FOR PROPOSALS DIFFERENT RESERVOIR.	AND REPORTS ON WELLS S TO DRILL OR TO DEEPEN OR PLUG BACK TO USE "APPLICATION FOR PERMI OR SUCH PROPOSALS.	7. Lease Name or Unit Agreement Name CENTRAL VACUUM UNIT		
1. Type of Well: OIL GAS WELL	OTHER WATER INJECTION			
2. Name of Operator TEXACO EXPLORAT	8. Well No. 160			
3. Address of Operator PO BOX 3109, MIDL	AND, TX 79702	Pool Name or Wildcat VACUUM GRAYBURG SAN ANDRES		
	Feet From The NORTH Line and 35			
Section 36 Towns	ship 17S Range 34E NN	MPM LEA COUNTY		
10. Ele	evation (Show whether DF, RKB, RT,GR, etc.) 4004' G	R Was de Miller		
11. Check Appropri	iate Box to Indicate Nature of Notice, Report	, or Other Data		

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	<u> </u>	ALTERING CASING	
TEMPORARILY ABANDON	 CHANGE PLANS	 COMMENCE DRILLING OPERAT	TION _	PLUG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND CEMENT JO	OB		
OTHER:	 	 OTHER: PERFORM	ED MIT & F	RETURNED TO INJECTION	~

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.

7-06-01:

- 1. Notified NMOCD. Tested csg from surface to packer set @ 4261' as per NMOCD guidelines to 540# for 30 mins. Held OK.
- 2. Returned to injection.

(ORIGINAL CHART OR COPY OF CHART ON BACK)

(INTERNAL TEPI STATUS: INJ)

I hereby certify that the promistion above is true and con	plete to the best of my knowledge that be	UTIF Engineering Assi	stant —	DATE 9.	/12/01
SIGNATURE J , AY M	J. Denise Leake	AILE Eligineering		Telephone No.	915-688-4752
(This space for State Use)					
APPROVED BYNDITIONS OF APPROVAL, IF ANY.	TITLE	Organia (Constitution)	DATI	E	2-93 ver 1.0