BUNDITIONS OF APPROVAL IF ANY: TITLE_

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office							rtev	isea I-I-
DISTRICTI	0	IL CONSE	RVATI	ON DIVISION	WELL API NO			
P.O. Box 1980, Hobbs, NM	88240		O. Box 208		WELL AFTING		3.4	
DISTRICT II					E Indiana T	30-025-301	J4 	
P.O. Box Drawer DD, Artes	ia, NM 88210	Santa Fe, N	ew Mexico	5 87504-2088	5. Indicate Ty		E	FEE !
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec	: NM 87410				6. State Oil /	Gas Lease No.		
·		ES AND REPORT	S ON MEI	1.0		B-1	565	
(DO NOT USE THIS FO	RM FOR PROPOS	SALS TO DRILL OR	TO DEEPE	N OR PLUG BACK TO	7. Lease Nar	ne or Unit Agreeme	ent Name	
DIFF		IR. USE "APPLICA 1) FOR SUCH PRO		PERMIT	1	VACUUM UNIT		
Type of Well: OIL	040		I OOALO.					
WELL	WELL	OTHER						
Name of Operator	TEXACO EXPLO	RATION & PRODU	CTION INC.		8. Well No.	242		
3. Address of Operator	205 E. Bender, H	OBBS, NM 88240			9. Pool Name		CANANDI	
Well Location					VAC	UUM GRAYBURG	SAN ANDI	(ES
Unit Letter	A:9	Peet From	The NOR	TH Line and 706	Feet From	The EAST	Line	
Section 36	То	ownship 17S	F	Range 34E	NMPM	LEA	COUNT	Υ
n (* 19 19) 1	1	0. Elevation (Show whe	ether DF, RKB	, RT,GR, etc.) 3993' C	GR	2		
11.	Check Appro	priate Box to In	dicate Nat	ure of Notice, Repo	ort, or Other [Data		
NOTICE OF	INTENTION T	TO:			SUBSEQUE	NT REPOR	T OF	
PERFORM REMEDIAL WOF	511	JG AND ABANDON	- 1	REMEDIAL WORK		ALTERING CAS		1
	···	ANGE PLANS	:-1		ODEDATION			
TEMPORARILY ABANDON		ANGE I LANG	i	COMMENCE DRILLING		PLUG AND ABA	MDOMMER	• •
PULL OR ALTER CASING			-	CASING TEST AND CEN	MENT JOB			
OTHER:	Request to convert	to injection	_	OTHER:				
Describe Proposed or 0 proposed work) SEE R	Completed Operati ULE 1103.	ons (Clearly state a	ll pertinent d	etails, and give pertinen	it dates, includin	g estimated date	of starting	j any
Texaco requests a permit as follows: 1. MIRU PULLING UNIT. 2. TIH W/TREATING PKR 3. ACIDIZE FORMATION 3000 GAL ACID, 2000# GELLED BRINE, 3000 GA 4. SHUT IN 2 HRS. FLOW 5. POH W/PKR & TBG. TI 6. LDWS. PU 2 7/8" TBG. 7. CHANGE WELLHEAD 8. SHUT WELL IN & WAIT	TIH W/BIT TO CIE & TBG. PSA 4206 W/12,000 GALS 2 FRK SLT IN GELL L ACID, FLUSH TO & SWAB BACK L IH W/BIT & TBG & TIH W/7" INJ PKF	BP @ 4193-4228'. (0'. PRESS BACKSII 0'% NEFE HCL USI ED BRINE, 3000 G. 0 4600'OADTag for fill. R & TBG.	C/O WELL T DE TO 500 F ING 6000# R	O PBTD @ 4720'. CSG PSI.	SHOE @ 4278'	DLLOWS:		
SIGNATURE TYPE OR PRINT NAME	enise Je	16		neering Assistant	MS	DATE	12/17/99 397-0	405
	<u></u>		J. 1880T	, , , , , , भी				
(This space for State Use)						*		
APPROVED								

_DATE__

DeSoto/Nichols 12-93 ver 1.0