Submit 3 copies to Appropriate

State of New Mexico En Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	Nevised 1-1-05
OIL CONSERVATION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088	30-025-31709
DISTRICT II P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE FEE
DISTRICT III	6. State Oil / Gas Lease No.
1000 Rio Brazos Rd., Aztec, NM 87410	B-2706
SUNDRY NOTICES AND REPORTS ON WELL (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.)	7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT
1. Type of Well: OIL GAS WELL OTHER INJECTION	
Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	8. Well No. 80
3. Address of Operator P.O. BOX 730, HOBBS, NM 88240	9. Pool Name or Wildcat VACUUM GLORIETA
4. Well Location	5 15 Th 510T
Unit Letter <u>G : 2517</u> Feet From The <u>NORTH</u> Line and <u>2442</u>	Feet From TheEASTLine
Section 36 Township 17S Range 34E NM	MPM LEA COUNTY
10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3997' GR	
11. Check Appropriate Box to Indicate Nature of Notice, Report	t, or Other Data
NOTICE OF INTENTION TO:	JBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPE	ERATION PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMEN	NT JOB 🔲
OTHER: OTHER:	GEL TREATMENT
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent any proposed work) SEE RULE 1103.	nt dates, including estimated date of starting
12/15/95 - 12/17/95	
1. SHUT-OFF INJECTION OF WATER TO WELL. MIRU POLYMER PUMP TRUCK TO WELLHEAD.	
2. ESTD PUMP RATE W/ FRESH WATER, PUMPED 2003 BBLS OF GEL. OVERFLUSHED W/ 30 BB	BLS WATER. SI 72 HRS.
3. RETURNED WELL TO INJECTION.	
OPT 4/7/96 INJECTING 986 BWPD @ 1060 PSI	
(INTERNAL TEPI STATUS REMAINS INJ)	

I hereby certify that the information above it	is true and complete to the best of my knowledge and belief.		
SIGNATURE Thom	TITLE Engr Asst	DATE <u>4/16/96</u>	
TYPE OR PRINT NAME	Monte C. Duncan	Telephone No. 397-0418	
This space for State Usel ORIGINAL SIGNED BY JERRY SEXTON APPROVED BY DISTRICT I SUPPLIABILE CONDITIONS OF APPROVAL, IF ANY:		APR 1 8 1996	
APPROVED BY nic	TRICT SUPERVISOR TITLE	DATE	
CONDITIONS OF APPROVAL, I	F ANY:		