Submit 3 copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P O Box Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

# OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-31783
5. Indicate Type of Lease STATE ✓ FEE
6. State Oil / Gas Lease No.

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

7. Lease Name or Unit Agreement Name
VACUUM GLORIETA WEST UNIT

1. Type of Well: OIL WELL GAS WELL OTHER WATER INJECTION WELL

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

8. Well No.
19

3. Address of Operator
PO BOX 3109, MIDLAND, TX 79702

9. Pool Name or Wildcat
VACUUM GLORIETA

4. Well Location
Unit Letter G : 1501 Feet From The NORTH Line and 1620 Feet From The EAST Line

Section 25 Township 17S Range 34E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT,GR, etc.) GR-3997'

11. 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 ✓ | ALTERING CASING |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING OPERATION | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | | CASING TEST AND CEMENT JOB | |
| OTHER: | | OTHER: REQUEST TA STATUS ✓ | |

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.

8-15-01: MIRU. NDWH. NUBOP. REL LOCK SET PACKER.
8-16-01: PU WS. TIH W/BIT & SCRAPER & TBG TO 5998. TIH W/CIBP & SET @ 5975'. PUMP 110 BBLS PACKER FLUID. PRESSURE TEST & CHART TO 500 PSI. CHART ATTACHED. RIG DOWN.
WELL IS TEMPORARILY ABANDONED.

This Approval of Temporary Abandonment Expires 8/31/06

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant DATE 8/24/01

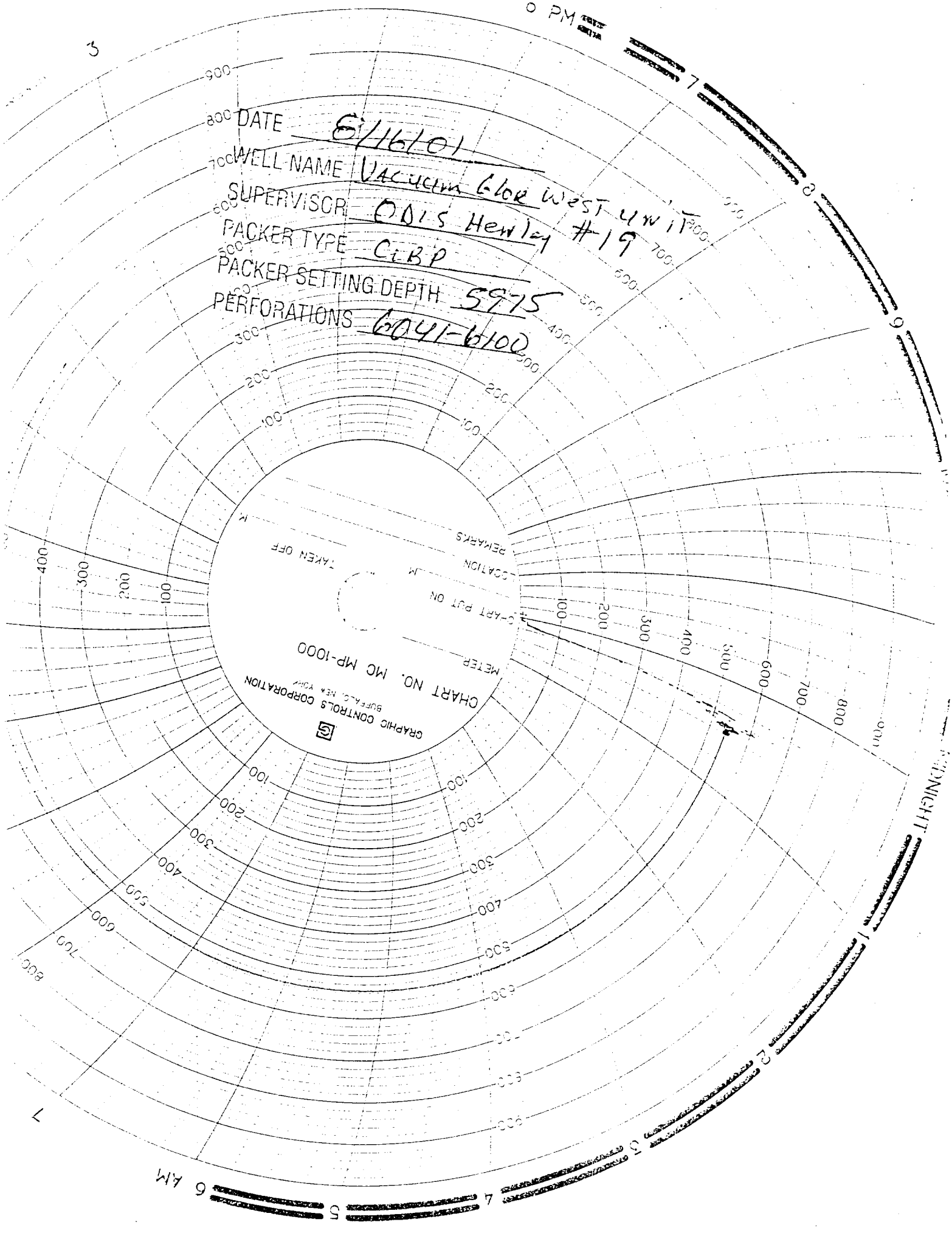
TYPE OR PRINT NAME J. Denise Leake Telephone No. 915-688-4752

(This space for State Use)

APPROVED
BY
CONDITIONS OF APPROVAL, IF ANY: TITLE DATE

DeSoto/Nichols 12-93 ver 1.0

JCG


DATE 6/16/01
WELL NAME Vacuum Glorieta West Unit #19
SUPERVISOR Otis Hewlett
PACKER TYPE CIBP
PACKER SETTING DEPTH 5975
PERFORATIONS 6041-6100
GRAPHIC CONTROLS CORPORATION
CHART NO. MC MP-1000
METER
C-ART PUT ON
LOCATION
REMARKS
TAKEN OFF
PM
AM
MIDNIGHT