Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-103
Revised 1-1-89

WELL API NO.
30-025-31786

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No.
B-1056-2

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

8. Well No.
30

2. Name of Operator
TEXACO EXPLORATION AND PRODUCTION INC.

9. Pool name or Wildcat
VACUUM GLORIETA

3. Address of Operator
P. O. Box 3109 Midland, Texas 79702

4. Well Location
Unit Letter J : 2305 Feet From The SOUTH Line and 1391 Feet From The EAST Line

Section 25 Township 17-SOUTH Range 34-EAST NMPM LEA County

10. Elevation (*Show whether DF, RKB, RT, GR, etc.*)
GR-3990', KB-4001'

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 OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		OTHER: COMPLETION [X]	

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.

1. MIRU COMPLETION UNIT. CLEAN OUT CASING TO PBTD OF 6200'. TESTED CASING TO 3000# FOR 30 MINUTES 12-29-92.
2. HALLIBURTON RAN GR-CCL. PERFED w/ 2 JSPF: 6034-58, 6087-97. 68 HOLES.
3. DOWELL ACIDIZED WITH 3000 GAL 15% HCL.
4. TIH WITH 2 7/8 TUBING AND PACKER. SET PACKER @ 5972'.
5. TESTED PACKER TO 500# FOR 30 MINUTES 01-04-93.
6. PREP FOR INJECTION.

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

SIGNATURE C.P. Basham / cwh TITLE DRILLING OPERATIONS MANAGER DATE 01-06-93

TYPE OR PRINT NAME C. P. BASHAM TELEPHONE NO. 915-6884620

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN - 8 1993

CONDITIONS OF APPROVAL, IF ANY: