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State of New Mexico

Form C-103

to Appropriate District Office Energy, Minerals and Natural Resources Department Revised 1-1-89 OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs, NM 88241 P.O. Box 2088 30-025-31843 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease STATE X FEE 📙 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B-155-6 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" VACUUM GLORIETA WEST UNIT (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Mar WELL. OTHER WATER INJECTION 2. Name of Operator 8. Well No. Texaco Exploration and Production Inc. 95 3. Address of Operator 9. Pool name or Wildcat P. O. Box 730 Hobbs, NM 88240 **VACUUM GLORIETA** 4. Well Location Unit Letter J 1534 Feet From The SOUTH 1521 Feet From The EAST Line and Line County Section 36 Township 17-S Range 34-E NMPM LEA 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3990' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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: BEGAN INJECTION OF WATER OTHER: 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.

9/3/93

BEGAN INJECTION OF FRESH WATER INTO WELL.

RATE @ APPROXIMATELY 900 BBL FRESH WATER ON A VACUUM

I hereby certify that the information above is true and complete to the best of my knowledge	ge and belief.	
SIGNATURE Morte Contraction	TITLE ENGINEER'S ASSISTANT	DATE 9-7-93
TYPE OR PRINT NAME MONTE C. DUNCAN		ТЕГЕРНОМЕ NO.393-7191
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON		orin 10 0 4002
APPROVED BYDISTRICT 1 SUPERVISOR	. TITLE	SEP 0 9 1993
CONDITIONS OF APPROVAL, IF ANY:		