Submit 3 Copies to Appropriate District Office	State of New Mexico Energy, Munerals and Natural Resources Department OIL CONSERVATION DIVISION P.O. Box 2088		Form C-103 Revised 1-1-89	
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240			WELL API NO. 30-025-31871	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease STATE X FEE B		
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 874	10		6. State Oil & Gas Lease No. B-3196	
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 OAS WELL WELL	OTHER WATER I	NJECTION		
2. Name of Operator			8. Well No.	
TEXACO EXPLORATION AND PRODUCTION INC.			63	
3. Address of Operator P. O. Box 3109 Midland, Texas 79702			9. Pool name or Wildcat	
4. Well Location			VACUUM GLORIETA	
	1340 Feet From The NORTH	Line and	1090 Feet From The EAST Line	
Section 35	Township 17-SOUTH Ran	nge 34-EAST	NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-4010', KB-4024'				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
•• •			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	GOPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING]	CASING TEST AND CE	EMENT JOB	
OTHER:		OTHER: COMPLETION X		
12. Describe Proposed or Completed (work) SEE RULE 1103.	Operations (Clearly state all pertinent details, an	d give pertinent dates, inclu	ding estimated date of starting any proposed	
2. UNION TIH AND TAGGED FHOLES. 3. DOWELL ACIDIZED WITH 4. TIH WITH 2 3/8 TUBING	ED CASING TO 3000# FOR 30 MINUPBTD @ 6296'. RAN GR-CCL. PERF 2500 GAL 15% HCL. 06-12-93. AND PACKER. SET PACKER @ 5843 # FOR 30 MINUTES 06-15-93.	FED W/ 2 JSPF: 59	01'-5914', 5962'-6004'. RAN 110	

I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE C. P. Basham / SIGNATURE	ge and belief. TITLE DRILLING OPERATIONS MANAGER	DATE 06-16-93
TYPE OR PRINT NAME C.P. BASHAM		TELEPHONE NO. 915-6884620
(This space for State Use) ORIGINAL SIGNED DE COMMON IXTON DISTRICT I SUPERVISOR		0.4.4000
APPROVED BY	TITLE	_ whn 2 1 1993

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