State of New Mexico Energy, Minerals and Natural Resources Department

Form C	-103
Revised	1-1-89

SWILL 3 COPIC
to Appropriate District Office
an appropriate
District Office

DISTRICT I P.O. Box 1980, Hobbe, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088	WELL API NO. 30-025-31875	
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lesse 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" (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT	
1. Type of Well: Off. WELL GAS WELL OTHER WATER INJECTION		
	A *** # **	
2. Name of Operator TEXACO EXPLORATION AND PRODUCTION INC.	8. Well No. 108	
3. Address of Operator P. O. Box 3109 Midland, Texas 79702	9. Pool name or Wildcat VACUUM GLORIETA	
4. Well Location Unit Letter P : 213 Feet From The SOUTH Line and	351 Feet From The EAST Line	
Unit Letter F : 213 Feet From The 300111 Line and	OO 1 Peet From The Line	
Section 36 Township 17-SOUTH Range 34-EAST	NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3986', KB-4000'		
	Onnert on Other Date	
Check Appropriate Box to Indicate Nature of Notice, F NOTICE OF INTENTION TO:	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLIN	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND C	CASING TEST AND CEMENT JOB	
OTHER: OTHER: COMPLETE	ion K	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, included) SEE RULE 1103.	uding estimated date of starting any proposed	
1. RIG UP UNION AND TESTED CASING TO 3000# FOR 30 MINUTES 06-15-93. 2. UNION TIH AND TAGGED PBTD @ 6169'. RAN GR-CCL. PERFED W/ 2 JSPF: 56164'. 206 HOLES. 3. DOWELL ACIDIZED WITH 4500 GAL 15% HCL. 06-16-93. 4. TIH WITH 2 3/8 TUBING AND PACKER. SET PACKER @ 5869'. 5. TESTED PACKER TO 540# FOR 30 MINUTES 06-20-93. 6. PREP FOR INJECTION.	957'–6016', 6073'–6100', 6147'–	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE C. P. Basham/ Stoth TITLE DRILLING OPERA	TIONS MANAGER DATE 06-21-93 TELEPHONE NO. 915-68846	
TYPE OR PRINT NAME C.P. BASHAM	TELEPHONE NO. 313-08840.	
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	JUN 2 4 1993	
APPROVED BY TITLE	DATE	

PECHIVED

JUN 23 1993

OBBS