Submit 3 Copies 10 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	P.U. BOX 2088 Sonto Be New Mexico 97504 2099		WELL API NO. 30-025-31884	-
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease	7
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE X FEE 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.) 1. Type of Well:			7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT	Z Z
Of GAS MELL GAS	OTHER WATER	INJECTION		
2. Name of Operator TEXACO EXPLORATION AND PRODUCTION INC.			8. Well No. 107	
3. Address of Operator P. O. Box 3109 Midland, Texas 79702			9. Pool same or Wildcat VACUUM GLORIETA	
4. Well Location Unit Letter P : 18	33 Feet Prom The SOUTH	Line and	024	ine
Section 36	Township 17-SOUTH Ra 10. Elevation (Show whether GR-3998', KB-4012'	DF, RKB, RT, GR, etc.)	NMPM LEA County	
11. Check	Appropriate Box to Indicate 1		eport, or Other Data	<u>///</u>
NOTICE OF INT			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. DPLUG AND ABANDONMENT	
JLL OR ALTER CASING CASING TEST AND C		MENT JOB 🗵		
OTHER:		OTHER: PRODUCTION	n Casing	$\langle x \rangle$
Describe Proposed or Completed Operat work) SEE RULE 1103.	ions (Clearly state all pertinent details, an	nd give pertinent dates, includ	ling estimated date of starting any proposed	
	7# WC-50 AND 126 JTS OF 1 078 SACKS 35/65 POZ CLASS LASS H (15.6 PPG, 1.18 CF/5	15.5#, LTC CASING S S H W/6% GEL, 5%:	SET @ 6390'. Salt, 1/4# Flocele (12.8 PPG, :30 AM 05-31-93. Circulated 193	

I hereby certify that the information above is true and complete to the best of my know signatures C. P. Basham / StOH	ricidge and belief. TITUE DRILLING OPERATIONS MANAGER	DATE 06-01-93
TYPEORPRINT NAME C.P. BASHAM	TELEPHONE NO. 915-6884620	
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR APPROVED BY	ти	