State of New Mexico

Submit 3 Copies to Appropriate District Office	Energy, k_erals and Natural Res		Form C-103 Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-025-32263
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Pe, New Mexico 8	37504-2088	5. Indicate Type of Lease STATE X FEE
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 8741	0		6. State Oil & Gas Lease No. B-2317
(DO NOT USE THIS FORM FOR DIFFERENT RE (FOR	OTICES AND REPORTS ON WELL PROPOSALS TO DRILL OR TO DEEPEN (SERVOIR. USE "APPLICATION FOR PER M C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name VACUUM GLORIETA WEST UNIT
1. Type of Well: OIL GAS WELL X WELL	Опия.		
2. Name of Operator TEXACO EXPLORATION AN	ID PRODUCTION INC.		B. Well No. 98
3. Address of Operator P. O. Box 3109	Midland, Texas 79702		9. Pool name or Wildcat VACUUM GLORIETA
4. Well Location Unit Letter P :	937 Feet From The SOUTH	Line and	532 Feet From The EAST Line
Section 35	Township 17-SOUTH Ran	ige 34-EAST	NMPM LEA County
	10. Elevation (Show whether I GR-4007', KB-4021'	DF, RKB, RT, GR, etc.)	
	ck Appropriate Box to Indicate NINTENTION TO:		Report, or Other Data SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	
PULL OR ALTER CASING]	CASING TEST AND CEMENT JOB	
OTHER:		OTHER: SPUD & SI	JRFACE CASING X
12. Describe Proposed or Completed C work) SEE RULE 1103.	pecutions (Clearly state all pertinent details, an	d give pertinent dates, incl	iding estimated date of starting any proposed
2. RAN 34 JTS OF 8 5/8, 3 3. DOWELL CEMENTED WIT CLASS C W/ 2% CACL2 (14 4. NU BOP & TESTED TO 30	24#, WC-50, STC CASING SET @ TH 500 SACKS CLASS C W/ 4% GI I.8 PPG. 1.34 CF/S), PLUG DOW!	1500'. RAN 10 CEN EL, 2% CACL2 (13.5 N @ 9:00 AM 01-16 FOR 30 MINUTES FF	5 PPG, 1.74 CF/S). F/B 150 SACKS

I hereby certify that the inform	DATE 01-18-94		
TYPE OR FRONT NAME C.P	•		TELEPHONE NO. 915-688462
(This space for State Use)	ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		
		mu	DATE A THE STATE OF THE STAT

CONDITIONS OF APPROVAL, IF ANY: