Submit 3 copies o Appropriate	State of New Mexico Energ, Minerals and Natural Resources Departmen	Form C-103
District Office		Nevisca III oo
DISTRICT I	OIL CONSERVATION DIVISIO	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	P.O. Box 2088	30-025-33765
P.O. Box Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease STATE FEE
DISTRICT III		6. State Oil / Gas Lease No.
1000 Rio Brazos Rd., Aztec, NM 87410		The state of the s
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESE	TICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO RVOIR. USE "APPLICATION FOR PERMI C-101) FOR SUCH PROPOSALS.	7. Lease Name or Unit Agreement Name WEST VACUUM UNIT
1. Type of Well: OIL GAS WELL WEL		
2. Name of Operator TEXACO EX	PLORATION & PRODUCTION INC.	8. Well No. 60
3. Address of Operator P.O. Box 21	00, Denver Colorado 80201	Pool Name or Wildcat GRAYBURG-SAN ANDRES
Well Location Unit Letter	2470 Feet From The SOUTH Line and 1100	Feet From The EASTLine
Section 34		
	10. Elevation (Show whether DF, RKB, RT,GR, etc.) 4027	
11. Chock A	ppropriate Box to Indicate Nature of Notice, Re	port or Other Data
NOTICE OF INTENTICE PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING OTHER:	ON TO: PLUG AND ABANDON REMEDIAL WORK CHANGE PLANS COMMENCE DRILLIN CASING TEST AND C	
proposed work) SEE RULE 1103. 1. RU SCH/LOG. TIH W/ CSG GUN. TIH W/ 5-1/2" PKR ON 2-7/8" TBG 2. DOWELL TESTED CSG TO 500#. 3. TIH W/ NIPPLE, 2-1/2" X 1-3/4" X 2 4. SET LUFKIN 640 P.U. AND HOOM 5. TOH W/ RODS AND PUMP, TBG. TOH W/ 2-7/8" TBG. 04-08-97. 6. TIH W/ PKR, JTS, TBG. SET PKR MIXED W/ BFW, ACROSS PERFS 7. TIH W/ TBG. NDBOP. NU WELL H	ACIDIZED SAN ANDRES PERFS 4622'-4816' W/ 6500 C 24' RHBP PUMP, K-BARS, RODS. 03-28-97. K UP ELEC .03-29-97. TIH W/ RBP ON 146 JTS 2-7/8" TBG. SET RBP @ 4595 R @4743'. BREAKDOWN PERFS 4622'-4816' @ 2500 PS S 4494'-4560'. 04-10-97. HEAD. BOTTOM OF STRING @ 4813', SN @ 4726'. 04-1 P, 3/4" OFF CPLG, SUBS, K-BARS, RODS, PR, PRL. HA 5-97.	770'-4816', 120 DEG PHASING. 64', 128, .47' HOLES GALS 15% NEFE HCL. 03-25-97. 1. SPOT 10' SAND ON TOP OF PLUG. 31. PUMP 2-DRUMS TH-756 SCALE 3-97.

I hereby certify that the information above is true and SIGNATURE C , P , C	d complete to the best of my knowledge and belief. TITLE Eng. Assistant.	DATE 4-28-97
TYPE OR PRINT NAME	Sheilla D. Reed-High	Telephone No. (303)621-485
(This space for State Use)	ODIO	State of the same of
APPROVED CONDITIONS OF APPROVAL, IF A	ORIGINAL SIGNED BY CHRIS WILLIAMS NY:TITLEDISTRICT SUPERVISORD.	ATE

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