2

State of New Mexico

Form C-103

to Appropriate District Office	Energy, Mi	is and Natural Resou	rces Department	Re	vised 1-1-89
DISTRICT I	OIL CON	SERVATION	DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240		P.O. Box 2088		30-025-34540	
DISTRICT II P.O. Box Drawer DD, Artesia, NM 882	10 Santa F	Fe, New Mexico 87	504-2088	5. Indicate Type of Lease	[]
DISTRICT III	10			STATE STATE	FEE
1000 Rio Brazos Rd., Aztec, NM 8741	0			6. State Oil / Gas Lease No.	
		ORTS ON WELL	PLUC BACK TO A		
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESEI		LOR TO DEEPEN OR PLICATION FOR PERM		7. Lease Name or Unit Agreement Nam	ne
(FORM (C-101) FOR SUCH	PROPOSALS.)		CENTRAL VACUUM UNIT	
1. Type of Well: OIL GAS WELL WELL					
Name of Operator TEXACO EXI	PLORATION & PR	ODUCTION INC.		8. Well No. 280	
3. Address of Operator P.O. Box 310	09, Midland Texas	79702		9. Pool Name or Wildcat	
4. Well Location					
Unit LetterL:	Feet	From The SOUTH	Line and 10	Feet From The WEST Line	
Section 36	_ Township 17-	S Range	34-E NM	IPM <u>LEA</u> COUN	TY
	•	how whether DF, RKB, R	T GR etc.) asset		
11. Check A	ppropriate Box	to Indicate Nature			
NOTICE OF INTENTIO	ON TO:		SU	JBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANI	DON REM	MEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COI	MMENCE DRILLING OPE	RATION PLUG AND ABANDONM	ENT
PULL OR ALTER CASING		/	SING TEST AND CEMEN	AL NOR	_
OTHER: EXTEND DR	RILLING PERMIT	⊠ от⊦	HER:		
12. Describe Proposed or Completed Open any proposed work) SEE RULE 110		state all pertinent deta	ails, and give pertiner	nt dates, including estimated date of	starting
DUE TO DRILLING PRIORITY, THIS W	ELL WILL NOT BE	SPUDDED BEFORE	DECEMBER 4, 1999 E	XPIRATION DATE. PLEASE EXTEND	THIS
DRILLING PERMIT AN ADDITIONAL YE					
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	/		L 25	pires Dec. 4,5	LUCC
Thereby certify that the information above is true and but the	Nete to the best of my know	riedge and belief.	ission Con	rdinator DATE 11/15/1	999
SIGNATURE			SIUTI UUUT		
TYPE OR PRINT NAME A. Phi	1 Kyar	P ATT LIAME		Telephone No. 688	-4606
(This space for State Use) ORIDA' 4	STAPPAVIOL	ĢĒ			
APPROVED BY		TITLE		DATE	
CONDITIONS OF APPROVAL, IF ANY:	-			DeSataAlichae 10-94 ver	20

DeSato/Nichols 10-94 ver 2.0