

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
B-154
7. Unit Agreement Name
-
8. Farm or Lease Name
New Mexico E St. NOT-1
9. Well No.
1
10. Field and Foot, or Wildcat
Eunice Monument
Grayburg San Andres
12. County
Lea

SUNDARY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR A WELL TO BE DRILLED IN A DIFFERENT RESERVOIR. SEE APPLICATION FOR PERMIT TO DRILL FOR SUCH PURPOSES.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER
2. Name of Operator
TEXACO Inc.
3. Address of Operator
P. O. BOX 728, HOBBS, NEW MEXICO 88240
4. Location of Well
UNIT LETTER <u>N</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>1</u> TOWNSHIP <u>20-S</u> RANGE <u>36-E</u> NMPM.
15. Elevation (Show whether DF, RT, CR, etc.)

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPER. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER ☐	OTHER ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Ringed up. Pulled rods & pump. Install BOP. Pull tubing.
2. Set RBP @ 3690'. Test csg. Tested OK.
3. Perforate 5" csg. w/4-JS @ 2375'.
4. Set cement retainer @ 2333'. Squeeze w/725 sx Class C Neat Cement. Eumont P & A 8-31-77,
5. Drill out cement & retainer. Test csg. w/1000# for 1 hr. tested OK.
6. Log well. Release RBP.
7. Set packer @ 3700'. Acidize 5" csg perforations 3744' - 3794' w/1000 gal. 15% NE acid.
8. Install rumping equipment. Test & place on production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>[Signature]</u>	TITLE <u>Asst. Dist. Supt.</u>	DATE <u>9-22-77</u>
APPROVED BY _____	TITLE _____	DATE _____

CONDITIONS OF APPROVAL, IF ANY: