Submit 3 Copies to Appropriate District Office

State of New Mexico y, Minerals and Natural Resources Departmen.

Form	C-1	103	
Revis	ed 1	-1-8	9

	ERVATION DIVISION	WELL API NO.		
D. 1	P.O. Box 2088	30-025-06030		
P.O. Drawer DD, Artesia, NM 88210 Salita Fe, New Mexico 8/304-2088		5. Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		STATE FEE XX 6. State Oil & Gas Lease No.		
CLINIDRY NOTICES AND DEDO				
SUNDRY NOTICES AND REPOI (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL O DIFFERENT RESERVOIR. USE "APPLIC (FORM C-101) FOR SUCH PRO	OR TO DEEPEN OR PLUG BACK TO	7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL GAS WELL X WELL O	THER	T. Anderson		
2. Name of Operator		8. Well No.		
Texaco Producing Inc. 3. Address of Operator		1		
P.O. Box 730 Hobbs, New Mexico 88	240	9. Pool name or Wildcat		
4. Well Location		Eunice Monument G.S.A.		
Unit Letter J :1980 Feet From The	South Line and	1980 Feet From The East Line		
Section 8 Township 20S	Range 37E	NMPM Lea County		
10. Elevation	on (Show whether DF, RKB, RT, GR, etc.)			
11. Check Appropriate Roy	3564 DF			
NOTICE OF INTENTION TO:	to Indicate Nature of Notice	Report, or Other Data		
		SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABJ	ANDON REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON CHANGE PLAN	S COMMENCE DRILL	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT X		
PULL OR ALTER CASING	OR ALTER CASING CASING TEST AND CEMENT JOB			
OTHER:	OTHER:			
12. Describe Proposed or Completed Operations (Clearly state all pwork) SEE RULE 1103.				
1. MIRU w/P&A equipment. Starting da	ate 5-2-91.			
2. TIH w/bit & scrapper to 3650'. To	OH w/bit & scranner			
3. Set CIBP @ 3630', dumped 35' class	ss "H" cmt on ton of Ca	BP. PBTD @ 3595'.		
4. TIH w/workstring, circ hole w/fro 5. Circ csg w/9.5 PPG mud, perf 4 sl	esh wtr.			
6. Set cmt ret @ 1133, pumped 150 s:	nots 면 1290'. Ys class "H" omt into r			
on top of cmt ret. (1110-1290)		errs & dumped 4 sx		
7. Spt 37 sx class "H" cmt from 128.	5' to 1185'.			
8. Spt 10 sx class "H" cmt from 27"	to surface.			
9. Cut off wellhead, installed dry	noie marker, cleaned lo	ocation. Completion date 5-7-91.		
I hereby certify that the information above is true and complete to the best of				
	f my bronded as and build			
SKONATURE MC About	•	Assistant 5-10-91		
TYPE OR PRINT NAME M.C. Duncan	•	DATE		
	•			
TYPE OR PRINT NAME M.C. Duncan	•	DATE		