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# NEW MEXICO OIL CONSERVATION COMMISSION

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

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT --" (FORM C-101) FOR SUCH PROPOSALS.)</p>		<p>5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/></p> <p>5. State Oil &amp; Gas Lease No.</p>
<p>1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>2. Name of Operator <b>Texaco, Inc.</b></p> <p>3. Address of Operator <b>P.O. Box 728 - Hobbs, New Mexico 88240</b></p> <p>4. Location of Well UNIT LETTER <b>I</b>, <b>1980</b> FEET FROM THE <b>South</b> LINE AND <b>660</b> FEET FROM <b>East</b> THE <b>West</b> LINE, SECTION <b>5</b> TOWNSHIP <b>19-S</b> RANGE <b>38-E</b> NMPM.</p>	<p>7. Unit Agreement Name</p> <p>8. Farm or Lease Name <b>H.D. McKinley</b></p> <p>9. Well No. <b>2</b></p> <p>10. Field and Pool, or Wildcat <b>Bowers</b></p>	
<p>15. Elevation (Show whether DF, RT, GR, etc.) <b>3611' (DF)</b></p>		<p>12. County <b>Lea</b></p>

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

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>PLUG AND ABANDON <input type="checkbox"/></p> <p>CHANGE PLANS <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOBS <input type="checkbox"/></p> <p>OTHER <input type="checkbox"/></p> <p>ALTERING CASING <input type="checkbox"/></p> <p>PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>Change of Status <input checked="" type="checkbox"/></p>
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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.

Please change the status on subject well from ASD (Abandonment Salvage Deferred) to Pumping effective 5-4-74.

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

SIGNED [Signature] TITLE Asst. Dist. Supt. DATE 5-22-74

APPROVED BY J. D. Ramey TITLE Dist. I, Supv. DATE

CONDITIONS OF APPROVAL, IF ANY