NO. OF COPIES RECEIVED		Form C-103
DISTRIBUTION		Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103
FILE		Effective 1-1-65
U.S.G.S.		54. Indicate Type of Lease
	-	State X 59 Fee
OPERATOR		5. State Oil & Gas Lease No.
OPERATOR		E-1731
(DO NOT USE THIS FORM FOR E USE "TAPPLIC	DRY NOTICES AND REPORTS ON WELLS ROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)	
1.		7. Unit Agreement Name
OIL GAS WELL X	OTHER-	-
2. Name of Operator		8. Farm or Lease Name Gas
TEXACO Inc.		New Mexico "CU" State Cor
3. Address of Operator		9. Well No.
P. 0. Box 728	Hobbs, New Mexico 88240	
4. Location of Well		10. Field and Pool, or Wildcat
INIT LETTER F	1980 FEET FROM THE NORTH LINE AND 1980 FEET FRO	UndesIgnated
	CINE AND FEEL FROM THE FEEL FROM	
West	TION 31 TOWNSHIP 20-S RANGE 36-E NMP	
THELINE, SEC	TION TOWNSHIP RANGE NMP	•• (///////////////////////////////////
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	Not Available	Lea AllIIIII
16		
	Appropriate Box To Indicate Nature of Notice, Report or C	
NOTICE OF	INTENTION TO: SUBSEQUE	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS 🔲 CASING TEST AND CEMENT JQB 🗙	
	OTHER	
OTHER		
	Operations (Clearly state all pertinent details, and give pertinent dates, includi	

work) SEE RULE 1103.

TOTAL DEPTH 359'

SPUDDED 13-3/4" HOLE, 8:45 P.M., SEPTEMBER 14, 1969

Ran 340' (12 joints) II-3/4" 0.D. 23.72# and 40# Smls. Casing and cemented @ 359' w/260 sx. Class "C" cement containing 2% CaCl & 1/4# Flocele per sack. Plug @ 329'. Cmt circulated. Job complete 1:30 P.M., September 15, 1969.

Tested 11-3/4" O.D. w/600# for 30 minutes from 8:00 A.N. to 8:30 A.M., September 16, 1969. Tested O.K. Drilled out cement plug and re-tested for 30 minutes from 9:45 A.M. to 10:15 A.M., September 16, 1969. Job complete 10:15 A.M., September 16, 1969.

18. I hereby certify that the information above is true and complet	te to the best of my knowledge and belief. Assistant TITLE District Superintendent	DATE September 17, 1969
APPROVED BY	TITLE SIZECTOR DISTRICT	<u></u>