

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> 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 I 2044 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 11 TOWNSHIP 20-S RANGE 37-E NMPM.	7. Unit Agreement Name 8. Farm or Lease Name C.H. Weir 'B' 9. Well No. 4 10. Field and Pool, or Wildcat Skaggs Glorieta, Weir- Blaine, East, Monument Tubb 15. Elevation (Show whether DF, RT, GR, etc.) 3591' (DF) 12. County Lea
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16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER REpair Water Flow ☒
ALTERING CASING ☐
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. Rigged up. Pull rods and pump.
2. Set RBP @ 3600' and spot 3 sx. sand on plug in Monument Tubb String.
3. Perforate 7 5/8" W/2-JS @ 1502'.
4. Set cement retainer @ 1400'. Cement to surface w/500 sx. Class H Cement containing 2% CACL. Squeeze w/addl. 180 sx. Class H Cement containing 2% CACL. WOC. DOC.
5. Tested casing to 600' for 30 minutes, 12:30-1:00 PM, 8-23-83. Tested OK.
6. Pull RBP. Install production equipment. Test and return to production.

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

SIGNED Jerry Sexton TITLE Asst. Dist. Mgr. DATE 9-1-83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE SEP 6 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 2 1983

O.C.D.
MOBES OFFICE