

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. Unit Agreement Name Skaggs Grayburg Unit
2. Name of Operator TEXACO Inc.	8. Farm or Lease Name Skaggs Grayburg Unit
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	9. Well No. 3
4. Location of Well UNIT LETTER I , 660 FEET FROM THE East LINE AND 1980 FEET FROM THE South LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E NMPM.	10. Field and Pool, or Wildcat Skaggs Grayburg
15. Elevation (Show whether DF, RT, GR, etc.) 3565' (DF)	12. County Lea

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

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

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 pkr & tbg.
2. Set RBP @ 3735'. Log well. Tested csg. Tested OK.
3. Squeeze 8-5/8" - 5-1/2" csg annulus w/2000 gals Halli flo-check, 300 sx Lite cement containing 15# salt per sack & 400 sx Class 'C' cement containing 2% CaCl.
4. Ran Temperature Survey. Cement from 2000' - surface. Pull RBP.
5. Ran tubing w/pkr. & set @ 3713'.
6. Return to Injection, 9-25-80.

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

SIGNED [Signature] TITLE **Asst. District Supt.** DATE **10-3-80**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: