

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 F 1980 FEET FROM THE West LINE AND 1985 FEET FROM THE North LINE, SECTION 12 TOWNSHIP 20-S RANGE 37-E NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 3574' (DF)	7. Unit Agreement Name C. H. Weir A 8. Farm or Lease Name 8 9. Well No. Skaggs Glorieta 10. Field and Pool, or Wildcat Lea 12. County Lea
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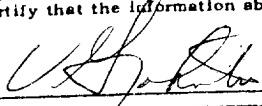
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data.

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"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <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.

Please cancel C-103, Notice of Intention to Squeeze Blinebry Perforations,
Approved 3-21-83.

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

SIGNED  TITLE Ass't. District Manager DATE 2-28-84

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____

MAR 2 1984