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NEW MEXICO OIL CONSERVATION COMMISSION

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

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO FILL OR PLUG BACK TO A DIFFERENT RESERVOIR.
SEE APPLICATION FOR PERMIT - 22 (FORM C-101) FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER- Water Injection	5a. Indicate Type of Lease State ☒ Fee ☐
2. Name of Operator TEXACO, INC.	5. State Oil & Gas Lease No. B-160
3. Address of Operator P.O. Box 728, Hobbs, New Mexico 88240	7. Unit Agreement Name Eunice Monument Unit
4. Location of Well UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 19 TOWNSHIP 20-S RANGE 37-E N.M.P.M.	8. Form of Lease Name Eunice Monument Unit
15. Elevation (Show whether DF, RT, GR, etc.) 3536' (DF)	9. Well No. 22
12. County Lea	10. Field and Pool, or Wildcat Eunice Grayburg San Andre

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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. Pull Tubing & packer.
2. Clean out to TD - 3860'.
3. Set cement retainer 3796' & test. Tested O.K.
4. Pumped 8400 gal. Injectrol G @ 2-BPM a 1500# into 4 3/4" open Hole 3800' - 3864'.
5. Squeeze open hole 3800' - 3864' w/75 sx Class 'C' Cement containing .5% Halad-9. Pull cement retainer.
6. Ran tubing & packer. Spot 200 gal. 15% NE Acid over open hole 3668' - 3800'.
7. Set packer @ 3508. Acidize open hole 3668' - 3800' w/2000 gal. 15% NE Acid in 2-equal stages using 500# rock salt between stages.
8. Flush w/18 bbls brine water.
9. Ran injection tubing & packer. Set packer @ 3585'.
10. Test Csg. to 500#. Tested O.K.
11. Run tubing & packer. Return to Injection.

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 5-26-76

APPROVED BY _____ TITLE _____ DATE JUN 4 1976

CONDITIONS OF APPROVAL, IF ANY: