Submit 3 Copies to Appropriate

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

DISTRICT I OH CONSERVATION DIVISION	
P.O. Box 1980, Hobbs NM 88240	API NO.
DISTRICT II Santa Fe New Mexico 87504 2089	30-025-06178
DISTRICT III	icate Type of Lease  STATE FEE  FEE
1000 Rie Denne It 4	te Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	B-159 ////////////////////////////////////
(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.)	se Name or Unit Agreement Name
	Mexico "C" State NCT-2
2. Name of Operator Texaco Producing Inc. 8. Wel	
3 Address of Occurren	9 N name or Wildcat
D 0 D 700 W 11 PM 00010	ont Yates 7 Rvrs Qn Gas
Unit Letter B: 992 Feet From The North Line and 1649	Feet From The East Line
Section 19 Township 20S Range 37E NMPM	Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
11. Check Appropriate Box to Indicate Nature of Notice, Report, of	Other Date
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	X ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMENT JO	08
OTHER: OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated work) SEE RULE 1103.	ated date of starting any proposed
<ol> <li>Ran bit &amp; csg scraper to 3550'.</li> <li>Ran pkr &amp; set @ 3295'. Test backside to 500#. O.K.</li> <li>A/OH 3405-3550' w/3000 gals 15% NEFE. Max P-2200#. AIR 6 B</li> <li>Frac same interval w/23000 gals linear gel, 23,000 gals CO<sub>2</sub> Max P-5247#. AIR 30 BPM.</li> <li>Flowed back.</li> <li>C/O to 3550'. Ran tbg, rods &amp; pmp.</li> <li>OPT 07-09-90, 4 BO, 4 BW, 300 MCFD.</li> </ol>	BPM. and 136,000# 12/20 sd.
I hereby cartify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE TITLE Engineer's Assista  TYPEOR PRINT NAME L. D. Ridenour  (This space for State Use)  ORIGINAL SIGNED BY ISTRY SEXTON  APPROVED BY DISTRICT I SUPERIOUS OR	TELEPHONE NO. 393-7191
CONDITIONS OF APPROVAL, IF ANY:	DATE