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AND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-55

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-160

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.)

OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- Injection Well
Name of Operator		
TEXACO INC.		
Address of Operator		
P.O. BOX 728, HOBBS, NEW MEXICO 88240		
Location of Well		
UNIT LETTER M, 660 FEET FROM THE South LINE AND 660 FEET FROM		
THE West LINE, SECTION 20 TOWNSHIP 20S RANGE 37E NMPM.		

7. Unit Agreement Name
8. Farm or Lease Name
Eunice-Monument Unit
9. Well No.
32
10. Field and Pool, or Wildcat
Eunice-Monument G-SA
12. County
Lea

15. Elevation (Show whether DF, RT, GR, etc.)

3528' DF

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <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.

REMARKS

1. WELL STATUS - Shut-In Injector
2. TEMPORARY ABANDONMENT DATE - January, 1974
3. REASON FOR ABANDONMENT - Premature Breakthrough
4. FUTURE PLANS - Remedial work planned to return well to injection.

5. DATE OF FUTURE WORKOVER OR PLUGGING - 1975

Expires 10/11/75

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

SIGNED	<i>[Signature]</i>	TITLE	Asst. Dist. Supt.	DATE	10-22-74
APPROVED BY	Orig. Signed by Joe D. Ramsey	TITLE		DATE	10-24-1974
CONDITIONS OF APPROVAL, IF ANY: Dist. I, Supv.					