

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	3002506312
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B160

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name New Mexico "H" State NCT-1
2. Name of Operator Texaco Producing Inc.	8. Well No. 24
3. Address of Operator P.O. Box 730, Hobbs, NM 88240	9. Pool name or Wildcat Eumont Yates, Seven Rivers, Qu
4. Well Location Unit Letter <u>I</u> : <u>1651</u> Feet From The <u>South</u> Line and <u>991</u> Feet From The <u>East</u> Line Section <u>31</u> Township <u>20S</u> Range <u>37E</u> NMPM Lea County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3532' GR

11. 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 checked="" 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 type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: <input type="checkbox"/>

12. 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.

- MIRU PU & Rev. Equip. TOH w/rods & pmp.
- Tag'd fill @ 3390'. Mixed 500 Bbls 40# gel, broke cir, C/O fill fr 3390-3500'. Cir & clnd out.
- TIH w/bit. Tag'd fill @ 3495'. TOH laying dn WS.
- TIH w/pmp & rods.
- OPT 12/02/90, 0 BOPD, 23 BWPD, 650 MCFD.

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

SIGNATURE M. C. Duncan TITLE Engineer's Assistant DATE 12/18/90

TYPE OR PRINT NAME M. C. Duncan TELEPHONE NO. 393-7191

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

(This space for State Use)