Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-103
Revised 1-1-89

WELL API NO.
30 025 06312

5. Indicate Type of Lease STATE [X] FEE [ ]

6. 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.)

7. Lease Name or Unit Agreement Name
New Mexico "H" State NCT-1

1. Type of Well:
OIL WELL [ ] GAS WELL [XX] OTHER

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 7 Rvrs Queen

4. Well Location
Unit Letter I : 1651 Feet From The South Line and 991 Feet From The East Line

Section 31 Township 20S Range 37E 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	[ ]	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 JOB	[ ]		
OTHER:	[ ]			OTHER:	[ ]		

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.

1. MIRU. Pld rods & tbg. TIH w/ pkr & set @ 3195. Load backside & tstd to 500#. OK.
2. Acidized Eumont (3300-3500) w/ 3000 gal 15% NEFE. Max Press 4100#.
3. Fraced Eumont w/ 29,100 gal 40# linear gel, 29,100 gal CO2 and 240,000# 12/20 sand. Max Press 6000# AVIR 30 BPM.
4. Flowed well back. Died. POH w/ packer.
5. Clean out fill w/ bit & bailer. Tools stuck.
6. Backed off, TIH w/ overshot, bumper sub, jars and drill collars. Jarred loose. POH.
7. Ran tbg, rods, pump. Placed on test.
OPT 10/19/90 0 BOPD, 32 BWPD, 369 MCFD.

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

SIGNATURE Larry D Ridenour TITLE Engineer's Assistant DATE 10-31-90

TYPE OR PRINT NAME Larry D. Ridenour TELEPHONE NO. 393-7191

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: