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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Lease Type of Lease	State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	None

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
TEXACO Inc.	V. M. Henderson
3. Address of Operator	9. Well No.
P. O. Box 728, Hobbs, New Mexico 88240	5
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER <u>CV</u> , 1930' FEET FROM THE East LINE AND 660' FEET FROM	Penrose Skelly
THE North LINE, SECTION 30 TOWNSHIP 21-S RANGE 37-E N.M.P.M.	
11. Elevation (Show whether DF, RT, GR, etc.)	12. County
3996' (D. F.)	Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
FULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <u>Shut Well in</u> <input type="checkbox"/>	

13. 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.

Subject well was shut in effective 8-7-68.
It is recommend that this well be reclassified from its present status to TR-0, Held for Secondary Recovery.

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

SIGNED W.B. Morgan TITLE Assistant District Superintendent DATE August 13, 1968

APPROVED BY John W. Runyan TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: