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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

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

AUG 13 6 18 AM '68

3a. 10-acre Type of Lease	State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	None
7. Unit Agreement Name	None
8. Farm or Lease Name	V. M. Henderson
9. Well No.	5
10. Field and Pool, or Wildcat	Penrose Skelly
12. County	Lea

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"/>	2. Name of Operator TEXACO Inc.	3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240	4. Location of Well UNIT LETTER <u>CB</u> , 1980' FEET FROM THE East LINE AND 660' FEET FROM THE North LINE, SECTION 30 TOWNSHIP 21-S RANGE 37-E NMPM.	15. Elevation (Show whether DF, RT, GR, etc.) 3996' (D. F.)
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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"/>
PULL 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 JOBS <input type="checkbox"/>	OTHER <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.

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.

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

SIGNED <u>W. B. Morgan</u>	TITLE <u>Assistant District Superintendent</u>	DATE <u>August 13, 1968</u>
APPROVED BY <u>John W. Runyan</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		