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# NEW MEXICO OIL CONSERVATION COMMISSION

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

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

## SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REOPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                           |  |                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------|
| 1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                         |  | 7. Unit Agreement Name                                   |
| 2. Name of Operator<br><b>TEXACO Inc.</b>                                                                                                                                                                 |  | 8. Farm or Lease Name<br><b>C.H. Weir "B"</b>            |
| 3. Address of Operator<br><b>P.O. Box 728 Hobbs, New Mexico 88240</b>                                                                                                                                     |  | 9. Well No.<br><b>7</b>                                  |
| 4. Location of Well<br>UNIT LETTER <b>J</b> <b>1980</b> FEET FROM THE <b>South</b> LINE AND <b>2307</b> FEET FROM<br>THE <b>East</b> LINE, SECTION <b>11</b> TOWNSHIP <b>20-S</b> RANGE <b>37-E</b> NMPM. |  | 10. Field and Pool, or Wildcat<br><b>Skaggs Drinkard</b> |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><b>3596' (DF)</b>                                                                                                                                        |  | 12. County<br><b>Lea</b>                                 |

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 type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input checked="" 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:

- Well Status - TR-0 (To Be Reconditioned-Oil).
- Temporary Abandonment Date-April, 1977.
- Reason for abandonment - Producing 100% water.
- Future Plans - Investigate well for remedial work to open additional drinkard pay and install pumping unit.
- Date of Future Workover - September, 1977.

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

SIGNED [Signature] TITLE Asst. Dist. Supt. DATE May 9, 1977

APPROVED BY [Signature] TITLE Dist. 1, Supv. DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

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