NO. OF COPIES RECEIVED		Form C -103 Supersedes Old
DISTRIBUTION		C-102 and C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
FILE		5a, Indicate Type of Lease
U.S.G.S.		State X Fee
LAND OFFICE		5. State Oil & Gas Lease No.
OPERATOR		
(DO NOT USE THIS FOR	SUNDRY NOTICES AND REPORTS ON WELLS IM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.	
1.		7. Unit Agreement Name
OIL GAS	OTHER-	
2. Name of Operator		8. Farm or Lease Name
TRYAC DACTET	C OIL CO., INC.	State "A" A/c-2
3. Address of Operator		9. Well No.
P.O. Box 106	9 - Hobbs, Nw Mexico e	61
4. Location of Well	e	10. Field and Pool, or Wildcat
	. 1980 FEET FROM THE South LINE AND 1780 F	EST FROM DO. Geence
UNIT LETTER		
Faat	INE, SECTION 8 TOWNSHIP 22-S RANGE 36-E	NMPM. ())))))))))))))))))))))))))))))))))))
THE LASE	INE, SECTION TOWNSHIP RANGE	
huuuuuu kuuuuu	15. Elevation (Show whether DF, RT, GR, etc.)	12. County
	358 8.4' GR	Lea
<u>16.</u>	Check Appropriate Box To Indicate Nature of Notice, Repor	t or Other Data
NOTI	CE OF INTENTION TO: SUBSE	EQUENT REPORT OF:
NOTIC		
	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WORK	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
TEMPORARILY ABANDON	CHANGE PLANS CASING TEST AND CEMENT JOB	
PULL OR ALTER CASING		
OTHER Completi	on .	
		· · · · · · · · · · · · · · · · · · ·

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 1 103.

- 1. Move in, rig up. Run GR/N log.
- Perf. with 1/2" jet charge 3793'3800-02-08-13-19-21-33-43-45-47-50-59-61-2. 66-74 and 76'.
- Run 2-3/8" tubing on treating packer and wash perfs. w/300 gal. mud acid. 3.
- Swab back mud acid. Set pkr. at 3750' and acidize perfs w/2000 gal. 15% NE 4.
- acid. 5. Swab back load and swab test.

If unsuccessful as oil well complete as injection well as follows:

- 1. Release packer and pull tubing.
- 2. Run 2-3/8" plastic coated tubing on Baker Model AD packer. Set @ 3775'.
- Displace annulus w/treated water and set packer. 3.
- Connect wellhead to commence water injection. 4.

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

Original Signed by SIGNED	TITLE Area Supt.	DATE	7-24-70
APPROVED BY	TITLE JUPERVISOR DISTRICT	DATE	

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