

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.O.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

30-025-20027

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
LG-893	

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator TEXACO, Inc.		8. Farm or Lease Name New Mexico 'DW' State
3. Address of Operator P. O. Box 728, Hobbs, New Mexico 88240		9. Well No. 1
4. Location of Well UNIT LETTER <u>F</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1866</u> FEET FROM THE <u>West</u> LINE, SECTION <u>6</u> TOWNSHIP <u>22-S</u> RANGE <u>35-E</u> NMPM.		10. Field and Pool, or Wildcat Grama Ridge Morrow, East
15. Elevation (Show whether DF, RT, GR, etc.) 3632' (GR)		12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☒
CASING TEST AND CEMENT JOBS ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Spud 17½" Hole, 2:00 PM, 12-31-84
TOTAL DEPTH 400'

1. Ran 382' (9 Jts) 13 3/8" OD 72# J-55 Csg & Set @ 400'.
2. Cemented W/600 SX Class H Cement containing 2% CaCl. Cement circulated. Job complete 4:55 AM, 1-1-85. WOC in excess of 18 hrs.
3. Tested 13 3/8" Csg to 1000# for 30 minutes, 2:00-2:30 AM, 1-3-85. Tested OK. Job complete 2:30 AM, 1-3-85.

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

SIGNED <u>W. A. Baker</u>	TITLE <u>Dist. Opr's. Mgr.</u>	DATE <u>1-15-85</u>
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

JAN 18 1985