Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 **Revised 1-1-89** 

APPROVED BY -

CONDITIONS OF APPROVAL, IF ANY:

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-025-30337 5. Indicate Type of Lease
P.O. Drawer DD, Artesia, NM 88210  DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE X FEE
1000 Kio Brizzot Kd., Aziec, 1441 87410			V-398
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.)			7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL X WELL	OTHER		N.M. "DX" State TN
2. Name of Operator			8. Well No.
Texaco Inc. 3. Address of Operator			9. Pool name or Wildcat
P. O. Box 728, Hobbs	, <u>New Mexico, 88240</u>		* See Below
4. Well Location Unit LetterK : 198	O Feet From The South	Line and 1980	Feet From The West Line
Sertion 17	Township 22-S Ran	age 35-E	NMPM Lea County
Section 1/	10. Elevation (Show whether I	OF, RKB, RT, GR, etc.)	
2567 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
		Nature of Notice, K	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING		G OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AN		CASING TEST AND C	EMENT JOB
OTHER: Cancel Drilling	Permit X	OTHER:	
12. 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.			
*Undes. San Simon Wolfcamp, Wildcat Bone Springs			
We do not intend to drill this well in the foreseeable future, therefore, we request that the drilling permit be cancelled.			
1 //	true and complete to the best of my knowledge an	d belief. District Pet	roleum Engineer 3/27/89
SIGNATURE SIGNATURE	man/	me	
TYPE OR PRINT NAME L. J. Se	eman		<u>тецерноне</u> но. 393-7191
(This space for State Use) RIGINAL SI DISTR	GNED BY JERRY SEXTON ICT I SUPERVISOR		MAR 3 0 19

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