Submit 3 Copies to Appropriate
District Office

State of New Mexico

rals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT I	OIL CONSERVA			WELL A	PI NO		
P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088			30-025-26986			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088				5. Indicate Type of Lease STATE X FEE			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				6. State	Oil & Gas Leas	e No.	6640
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 GAS WELL THER				Getty 32 State Com			
2. Name of Operator	2			8. Well	No.		-
Texaco Exploration and	Production In	<u> </u>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>		
3. Address of Operator P.O. Box 730 Hobbs, New	v Mexico 88240 🚜	2		1	name or Wildca brey Morr		
4. Well Location Unit Letter _G : 1980	Feet From The	Nort	h Line and	1980	Feet From The	Ea	st Line
Section 32	Township 21S	Da	nge 32E	NMFM		Lea	County
Section 32	10. Elevation (Show)	whether i	DF, RKB, RT, GR, etc.)	INIVITIVI	V//	7777777	
	////	3	3757 GR			<u>/////////////////////////////////////</u>	
11. Check Ap	propriate Box to Ind	icate N	Nature of Notice, F	Report, o	r Other Dat	ta	
NOTICE OF INTE	NTION TO:		SUE	BSEQU	ENT REP	ORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK		XX ALTE	ERING CASIN	G [
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLIN	G OPNS.	PLU	G AND ABANI	DONMENT [
PULL OR ALTER CASING			CASING TEST AND C	EMENT JO	ов 🗌		
OTHER:			OTHER:				Γ
 Describe Proposed or Completed Operation work) SEE RULE 1103. 	ns (Clearly state all pertinent d	letails, an	d give pertinent dates, incl	uding estima	ited date of starti	ng any propose	d
. SI well, RU Otis slickli 2. GIH with 1.87" gauge rir further. 3. POOH with gauge ring. RI	ng, ring hung up						
procedures.	siickiine. Open	eu we	ii to producti		rr cvaraa	ce dicei	ild C Z V C
I hereby certify that the information above is true as							
SIGNATURE TIL CONTRACTOR		тп	Engineer's A	ssista	ntr)ATE6-6-	91
TYPE OR PRINT NAME M.C. Duncan					ТТ	ELEPHONE NO.	<u> 393–7191</u>
(This space for State Use) ORIGINAL SIGNED BY DISTRICT 1 SUP						JUL	1 6 199

TITLE .

DISTRICT ! SUPPRE YO