

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State File or Lease No. B-158
7. Unit Agreement Name
8. Former Lease Name New Mexico 'BZ' State
9. Well No. NCT-8
10. Lease Section or Well No. Langlie Mattix Seven Rivers Queen
12. County Lea

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.)

OIL WELL ☐ GAS WELL ☐ OTHER **Water Injection Well**

Name of Operator
TEXACO Inc.

Address of Operator
P. O. Box 728, Hobbs, New Mexico 88240

1. Location of Well

UNIT LETTER **H** **1930** FEET FROM THE **North** LINE AND **660** FEET FROM
THE **East** LINE SECTION **16** TOWNSHIP **23-S** RANGE **37-E** N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
3319 DF

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 Casing Leak Survey <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.

NMOCD Representative, A. A. Plattsmier, visually inspected each string of pipe, 6-15-80.

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

SIGNED *[Signature]* TITLE **Asst. District Supt.** DATE **8-18-80**

APPROVED BY *[Signature]* TITLE **OIL & GAS INSPECTOR** DATE **8-18-80**

CONDITIONS OF APPROVAL, IF ANY: