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U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR APPLICATION TO WELL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
TEXACO Inc.

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

4. Location of Well
UNIT LETTER **D** **660** FEET FROM THE **North** LINE AND **660** FEET FROM
West THE **16** LINE, SECTION **23-S** TOWNSHIP **37-E** RANGE

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-158

7. Unit Agreement Name
-

8. Form or Lease Name **NCT-8**
New Mexico 'BZ' St.

9. Well No.
8

10. Field and Pool or Wildcat
Langlie Mattix
Seven Rivers Queen

12. County
Lea

15. Elevation (Show whether DF, RT, GR, etc.)
3313' (GR)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	OTHER ☒ Convert to Wtr. Inj.

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.

1. Rig up. Install BOP. Pull production equipment.
2. Clean out to TD (3700')
3. Perforate 4 1/2" OD Csg. w/2 JSPF from 3481' - 3483' & 3512' - 3514'
4. Set packer @ 3384'. Acidize perforations 3481' - 3611' w/1500 Gal. regular mud acid in 3-equal stages using 500# rack salt between stages. Flush w/20 Bbls. treated water.
5. Run 2 3/8" OD tubing (internally plastic coated) w/packer & set @ 3277'.
6. Load Csg. Annulus w/inhibited water.
7. Test & place well on injection.

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

SIGNED *[Signature]* TITLE Asst. Dist. Supt. DATE 8-18-77

APPROVED BY Orig. Signed by TITLE Asst. Dist. Supt. DATE 8-18-77

CONDITIONS OF APPROVAL, IF ANY: See 1. Supt.