NO. OF COPIES RECEIVED				Form C			
DISTRIBUTION				Supersedes Old C-102 and C-103			
SANTA FE	— NEW M	EXICO OIL CONS	ERVATION COMMISSION		ive 1-1-65		
FILE	\dashv			E 731	o Tur/-		
U.S.G.S.				State	te Type of Leas	Fee	
OPERATOR OPERATOR					il & Gas Lease		
OFERATOR				0. 5.4.0	ii d Ods Ledse		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO BRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)							
1.			,		reement Name	,,,,,,,,	
OIL GAS WELL	отнея- Wate	r Injection	L ell				
2. Name of Operator		•		8. Farm o	Lease Name		
TEXAS PACIFIC OIL CO 3. Address of Operator	., ING.			30. Le 9. Well No	onard Uni	t Tr.3	
P. O. Box 1069 - Hob	bs, New Mexico	88240		8 7111			
4. Location of Well				ŀ	and Pool, or Wil	Idcat	
UNIT LETTER		M THE North	LINE AND 1980 F	EET FROM SON	99+74-Q49	(Person	
- 77	0.4						
THE West LINE, SE	CTION	TOWNSHIP26-S	RANGE	_ имрм.			
	15. Eleve	ation (Show whether	DF, RT, GR, etc.)	12. Count	////	11111	
		29921	DF -	Les			
16. Chec	k Appropriate Box		ature of Notice, Report				
	INTENTION TO:			QUENT REPOR	ΓOF:		
PERFORM REMEDIAL WORK	PLU	G AND ABANDON	REMEDIAL WORK		ALTERING CASIN	NG _	
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.	-	PLUG AND ABAND	DONMENT	
PULL OR ALTER CASING	CHA	NGE PLANS	CASING TEST AND CEMENT JQB			_	
OTHER			OTHER Converted to	- Water Injec	tion	يا	
OTHER							
17, Describe Proposed or Completed work) SEE RULE 1103.	Operations (Clearly st	ate all pertinent det	ils, and give pertinent dates, i	including estimated d	ate of starting o	any propose	
, <u>-</u>							
1. Moved in, rigged	up, pulled roo	ds, pump & t	ubing.				
2. Clesned out to 3							
			6'. Set RBP @ 3470	o'.			
			Set RTTS pkr @ 335				
5. Acidized perfs w	/1500 gal 15% l	NE. Release	d pkr. Displaced	cid in forma	tion.		
	tubing, pkr & l	RBP. Ran 10	6 jts 2-3/8" plasti	ic coated tub	ing,		
packer @ 3356'.							
7. Layed injection 1	line, hooked u	p well.					
Tob completed 1-1	14.79 W411 L.						
Job Completed 1-1	L4-/3. WIII DE	egin injecti	on after approval f	rom Sinta Fe	•		
18. I hereby certify that the informat	ion above is true and co	omplete to the best	of my knowledge and belief,				
Original Signer	d Dv						
SIGNED Claude Aubert	•	TITLEA	sa Superintendent	DATE	1_16_72		
			Juperzmeenuent		1 10-73		
	Orig. Signed by				MAR 5	1973	
APPROVED BY	Too D. Ramey	TITLE		DATE_			
CONDITIONS OF APPROVAL, IF A	NYDist. I, Supv.				u		