NO. OF COPIES PECETIVES			Form C-103 Supersedes Old	1	
	ISTRIBUTION			C-102 and C-103	
ANTA FE	NEW MEXICO OIL CO	DNSERVATION COMMISSION	Effective 1-1-6	5	
ILE					
.5.G.S.			5a. Indicate Type	رسا	
AND OFFICE			State	Fee [
PERATOR			5. State Oil & Gaz	Lease No.	
PERATOR					
SUMPRY I	OTICES AND REPORTS	ON WELLS			
DO NOT USE THIS FORM FOR PACEDONS	LES TO THIS E OR TO PERSON IN FOR PERSON -" (FORM C-101, FOR	UG BACK TO A DIFFERENT RESERVOIR. Such Propusals.)			
			7. Unit Agreement	Matte	
11266	DTHER.		6, Farm or Lease	Name	
TEXACO INC.			1 1	J. F. Black	
			9. Well No.		
P. O. Box 728, Hobbs, New Mexico 88240			5	5	
Lecation of Well			tanel re m	Langife Mattix Seven Rivers Queen	
	BO FEET FROM THE Sout	h 2030 FFF	Rivers Que	een	
UNIT LETTER	FERT FROM THE	CINE AND	TITITI		
West	2124	-S RANGE 37-E	NMPM.		
THE LINE, SECTION	TOWNSHIP	RANGE	<u> </u>	7/7/1/7/7///	
	15. Elevation (Show whe	ther DF, RT, GR, etc.)	. 12, County		
	323	9' (DF)	Lea	VIIIIIII	
Check don	propriate Box To Indicat	e Nature of Notice, Report	or Other Data		
NOTICE OF INTE		, subsec	QUENT REPORT OF:		
NOTICE OF INVE			·		
ERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	X ALTERI	HG CASING	
EMPCRARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AI	NO ABANDONMENT	
ULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB		٠	
ott on Atrica casing		OTHER			
OTHER	-				
			1 12 22 24 2 24 2 26	tarting any propored	
1. Describe Proposed or Completed Operat work) SEE RULE 1103.	ions (Clearly state all pertinent	details, and give pertinent dates, in	cluding estimated date of s	tarting any proposed	
WORKY SEE ROLL 1103.					
1 Diamed un	Dulled mode & nu	mp. Installed BOP.	Pulled tubing		
1. Rigged up.	Just cont 220	mp. Histarred Bor.	rulled cubing.	ogh	
2. Set pkr. @	nen hole section	gal. Nocor 73' acid 2421'-3700'. Flush	w/230 gar. In	ebii eb	
water in of	ben hore section	2421 -5100°. FIUSII	MATO DOTE: ILE	511	
	dumning equinment	. Test & place on p	roduction		
J. Installed	bambring edarbmenc	. lest a prace on p	1 oddo o 1 om.		
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		east of my knowledge and helief.			
1. I hereby certify that the information abo	we is true and complete to the b	cet of my knowledge and better			
		Asst. Dist. Supt.	DATE 2-25	- 77	
GNED April	71716_	noot. Dist. Dapo.	DATE		
			 10 € 1 ¹⁶ -	- 📆	
S info	-, Gir 6 5 4			· <i>''</i>	
	Contract Contract		DATE		

ONDITIONS OF APPROVAL, IF ANYTHE & Supv.

RECEIVED

FET 28 1977