NO. OF COPIES RECEIVED		
DISTRIBUTION		Form C-103 Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103
FILE	P / DO DU SOL	Effective 1-1-65
U.S.G.S.	32° 71   1 22 PN 355	5a. Indicate Type of Lease
LAND OFFICE		State Fee X
OPERATOR		5. State Oil & Gas Lease No.
		Fee
SUNDR	Y NOTICES AND REPORTS ON WELLS  POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  TON FOR PERMIT	
1.	ION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.)	7. Unit Agreement Name
OIL GAS WELL 2. Name of Operator	other. Water Injection	NONE
	TEXACO Inc.	8. Form or Lease Name J. F. Black
3. Address of Operator	P. O. Box 728 - Hobbs, New Mexico	9. Well No.
4. Location of Weil		10. Field and Pool, or Wildcat
UNIT LETTER C 26	26 FEET FROM THE West LINE AND 1310 FEET FR	Langlie-Mattix
North	27 2), 9	
THE LINE, SECTIO	N 21 TOWNSHIP 24-S RANGE 37-E NMI	M/M/M/M/M/M/M
	15. Elevation (Show whether DF, RT, GR, etc.)	
	3235' (D. F.)	12. County Lea
Check A	Appropriate Box To Indicate Nature of Notice, Report or C	Other Data
_	SUBSEQUE	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERNA
TEMPORARILY ASANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB X	PLUG AND ABANDONMENT
	OTHER	ŕ¬
OTHER		
17. Describe Proposed or Completed One	erations (Clearly state all pertinent details, and give pertinent dates, includi	
work) SEE RULE 1 105.	state att pertinent detaits, and give pertinent dates, includi	ng estimated date of starting any proposed
		•
•	Total Depth - 3635	•
	7" 0. D. Casing Cemented at 250	
JOJI WILL	of 2 7/8" 0. D. Casing, 6.50 LB, J-55, NEW, a 325 Sx. Incor 4% gel with FRA. Plug at 3627. September 26, 1965.	nd cemented at  outline  outli
1 • 11 • 60 )	7/8" 0. D. Casing for 30 minutes with 1500 P. 3:30 P. M. September 27, 1965. Tested 0. K. September 27, 1965.	S. I. from 3:00 Job complete
		•
18. I hereby certify that the information ab	pove is true and complete to the best of my knowledge and belief.	
UP M	which is the best of my knowledge and belief.	Ü
GIGNED WY - I NOSOLAN	1/	
	V TITLE Assistant to the District	BATE September 28, 1965
W. H. Mor	gan` Superintendent	
APPROVED BY	**************************************	1. Table 1

CONDITIONS OF APPROVAL, IF ANY: