Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office			Kevised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION		WELL API NO.
DISTRICT II	P.O. Box 208 Santa Fe, New Mexico		30-025-11048
P.O. Drawer DD, Artesia, NM 88210	Danta 1'e, 14ew Mexico	07304-2088	5. Indicate Type of Lease
DISTRICT III		•	STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
SLINDRY NOT	ICES AND REPORTS ON WE	1.0	
(DO NOT USE THIS FORM FOR PR	OPOSALS TO DRILL OR TO DEEPEN	OR PLUG BACK TO A	
DIFFERENT RESE	RVOIR. USE "APPLICATION FOR PE	RMIT"	7. Lease Name or Unit Agreement Name
1. Type of Well:	2-101) FOR SUCH PROPOSALS.)		S. E. Toby
OIL GAS WELL X	ОТНЕЯ		
2. Name of Operator	OTAS		0.771.00
Texaco Exploration	and Production Inc.		8. Well No.
3. Address of Operator	Troduction inc.		9. Pool name or Wildcat
P.O. Box 730, Hobbs	NM 88241-0730		Jalmat T-Y-SR
4. Well Location			/
Unit Letter M: 6	60 Feet From The W	Line and 660	Feet From The S Line
Section	Township 24-S, Ra  10. Elevation (Show whether)	nge 37-E	NMPM Lea County
	3314'		<i>\(\(\(\(\(\(\(\(\(\(\)\\\\\\\\\\\\\\\\</i>
11. Check	Appropriate Box to Indicate 1		
NOTICE OF IN			
NOTICE OF IN	TENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. DPLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	
OTHER:		OTHER: SOZ Jal	mat Perfs in Dual Well 🗓
12. 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.			
12-2-91 - NOTIEV N	MOCC PEDDECENMAMIX	T MD DAY OUT	m**
12-2-91 - NOTIFY NMOCC REPRESENTATIVE MR. RAY SMITH 1) Set 4 1/2" CIBP @ 3420' W/10' CMT ON TOP			
2) SET 7" CMT RET @ 2850', TEST BACKSIDE TO 500# HELD OF			
3) 5Q2 JALMAT PERES 2928'-3335' W/200 SX CLASS 'C' CMT MOC 24 HBC			
4) DRILL OUT CMT 29/0'-3050'. TEST LINER TOP 500# HELD OF			
5) C/O TO 3632'. RUN INJECTION TUBING, SET PKR @ 3409' LOAD BACKSIDE			
W/INDIBITED WATER.			
6) TEST BACKSIDE TO 500#. HELD OK. (CHART ON REVERSE) 7) RESUME INJECTION 12-08-91 INTO LOWER ZONE (LM7RQG)			
MYERS LANGLIE MATTIX UNIT WELL #244.			
•	#2.	· · ·	
I hereby certify that the information about to the	and complete to the best of my knowledge and t		
SKINATURE TOWNS ON SOME IS THE			
SKITATURE	TITL	Engr. Asst.	DATE 12-12-91
TYPE OR PRINT NAME L.W. Johns	on		TELEPHONE NO. 397-0426
(This space for State Use)			

(Now Rengla Lyn Ing.)

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