

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	5. Lease Designation and Serial No. LC-069052
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	6. If Indian, Alottee or Tribe Name
3. Address and Telephone No. P.O. BOX 730, HOBBS, NM 88240 397-0426	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter <u>G</u> : <u>2310</u> Feet From The <u>NORTH</u> Line and <u>1650</u> Feet From The <u>EAST</u> Line Section <u>31</u> Township <u>24S</u> Range <u>38E</u>	8. Well Name and Number WEST DOLLARHIDE DRINKARD UNIT 50
	9. API Well No. 30 025 12277
	10. Field and Pool, Exploratory Area DOLLARHIDE TUBB DRINKARD
	11. County or Parish, State LEA, NEW MEXICO

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> OTHER: <u>convert to producer</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work).\*

Texaco intends to convert this injection well to a producing well.

1. MIRU. Install BOP. TOH with injection equipment.
2. Clean out liner to 6575' with casing scraper and bit.
3. TIH with packer and tubing; set @ 6300'. Pressure test casing to 500 psi for 30 minutes. TOH.
4. Acid treat perforations on interval 6385'-6534'.
5. TIH with production equipment.
6. Place on production and test.

The above proposed work will be performed upon BLM approval.

RECEIVED  
 NOV 11 11 21 AM '95  
 1995

14. I hereby certify that the foregoing is true and correct.

SIGNATURE *Darrell J. Carriger* TITLE Engineering Assistant DATE 10/6/95

TYPE OR PRINT NAME Darrell J. Carriger

(This space for Federal or State office use)

APPROVED BY Orig. Signed by Adara S. Sanchez TITLE Supervisor DATE 12/7/95

CONDITIONS OF APPROVAL, IF ANY:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.