

5. LEASE DESIGNATION AND SERIAL NO.
LC-067968

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals.)

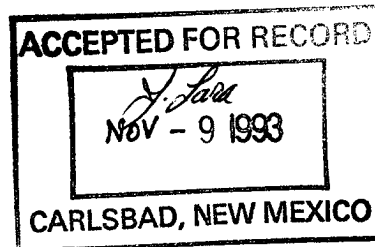
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME WEST DOLLARHIDE DRINKARD	
2. NAME OF OPERATOR TEXACO EXPLORATION AND PRODUCTION INC.		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR P. O. Box 3109, Midland, TX 79702		3a. AREA CODE & PHONE NO. (915) 688-4620	9. WELL NO. 137
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1125' FSL & 2450' FEL, UNIT LETTER O, SW/SE		10. FIELD AND POOL, OR WILDCAT DOLLARHIDE TUBB DRINKARD	
14. PERMIT NO. API#: 30-025-32088		15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR-3166', KB-3179'	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 19, T-24-S, R-38-E
		12. COUNTY OR PARISH LEA	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) COMPLETION <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. 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.)*

- MIRU SERVICE UNIT CLEANED OUT TO PBD @ 7537'. TESTED CASING TO 3000# FOR 30 MINUTES 09-15-93.
- HLS RAN GR-SDL-DSN-CSNG FROM 6200' TO 7660'. PERFD WITH 2 JSPF: 7083-7087, 7101-7107, 7124-7127, 7171-7179, 7192-7201, 7217-7222, 7307-7315, 7452-7468, 7494-7499, 7509-7515. 140 HOLES.
- SET PACKER @ 7000'. DOWELL ACIDIZED WITH 5001 GAL, 15% HCL. 09-19-93.
- RU HLS TIH AND SET CIPB @ 7050'. TESTED TO 3000#. HLS PERFD WITH 2 JSPF: 6851-6859, 6872-6879, 6920-6924, 6929-6932, 6934-6937, 6940-6944, 6950-6952, 6980-6985. 36 HOLES.
- DOWELL ACIDIZED WITH 3000 GAL, 15% HCL. 09-22-93. TOH W/ TUBING AND PACKER. RU HLS TIH AND SET RBP @ 6790'. TESTED TO 3000#. HLS PERFD WITH 4 JSPF: 6639-6654, 6661-6666, 6671-6675, 6684-6691, 6700-6712, 6717-6719, 6723-6731. 212 HOLES. PULLED PACKER UP TO 6494' AND SET.
- DOWELL ACID/FAC'D WITH 15000 GAL 65 QUALITY FOAMED 20% HCL. 09-27-93. RELEASED PACKER AND RETRIEVED RBP. TIH W/ 2 7/8 TUBING, RODS AND PUMP.
- PUMPED 91 BO, 277 BW, 40 MCF IN 24 HRS. 10-07-93.
- TESTING.



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

SIGNED C.P. Basham / SDH TITLE DRILLING OPERATIONS MANAGER DATE 10-08-93

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side