

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions  
reverse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-10185

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

TEXACO PRODUCING INC.

3. ADDRESS OF OPERATOR

P.O. BOX 728, HOBBS NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

UNIT LETTER O, 330' FROM THE SOUTH LINE AND  
180' FROM THE EAST LINE

14. PERMIT NO.

30-025-12213

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

3169' O.F.

7. UNIT AGREEMENT NAME

WEST DOLLARHIDE DRINKARD UNIT

8. FARM OR LEASE NAME

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

DOLLARHIDE TUBB DRINKARD

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

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:

TEST WATER SHUT-OFF

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☐  
☐  
☐

PULL OR ALTER CASING

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☐  
☐  
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐  
☐  
☒

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

☐  
☐  
☐

(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.)

- 1) MIRU. TOH W/ PRODUCTION EQUIPMENT.
- 2) CLEAN OUT HOLE TO 6871'. SPOT 84 GALS CONVERTER W/ 84 GALS FRESH WATER.
- 3) PERFORATE DOLLARHIDE TUBB DRINKARD W/ 2 SPF AT 6610'-11', 77.5-79.5, 6750-54, 90-98, 6827-30; 38 SHOTS
- 4) TIH W/ PKR TO 6486'. SWAB WELL.
- 5) ACIDIZE DRINKARD PERFORATIONS W/ 10,000 GALS 15% NEFE HCL W/ BALL SEALERS.
- 6) SWAB WELL AND SQUEEZE 2 DRUMS SCALE INHIBITOR MIXED IN 30 BBL FRESH WATER AND FLUSH W/ 100 BBL FRESH WATER MIXED IN 5 GAL SURFACTANT.
- 7) TIH W/ PROD. TBS, ANCHOR, RODS, AND PUMP.
- 8) WELL POTENTIAL - 24 HR TEST 4480, 156 BW, GOR 22

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

SIGNED

*KE Johnson*

TITLE

AREA SUPERINTENDENT

DATE

4-21-87

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

APR 27 1987

\*See Instructions on Reverse Side

SJS  
CARLSBAD, NEW MEXICO