Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IP ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION		WELL API NO.		
DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-025-06070		
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III		07504-2566	5. Indicate Type of Lea	STATE	FEE X
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lea	se No.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A					
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERV (FORM C-1		7. Lease Name or Unit Agreement Name C.H. WEIR "A"			
1. Type of Well: OIL X GAS WELL X WELL OTHER					
2. Name of Operator Toyono Evaluation and Production Inc.			8. Well No.		
Texaco Exploration and Production Inc. 3. Address of Operator			9. Pool name or Wildcat		
P. O. Box 730 Hobbs, NM 88240			SKAGGS DRINKARD		
4. Well Location			TOTALGO DIMINATI	<u> </u>	
Unit Letter E : 1984	Feet From The NORTH	Line and	660 Feet From The	WEST	Line
Section 12			NMPM LEA		County
	10. Elevation (Show whether 3585' DF				
11. Check A	ppropriate Box to Indicate 1		mort or Other Do	//////////////////////////////////////	
NOTICE OF INTE	•	BSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	REMEDIAL WORK		ERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB				
OTHER:		OTHER:	4		
12. Describe Proposed or Completed Operatio work) SEE RULE 1103.	as (Clearly state all pertinent details, an	d give pertinent dates, includ	ing estimated date of start	ing any proposed	
11/16/92 - 12/01/92 1. MIRU. FISHED OUT VANN PER	RF GUN, TOF WAS @ 6698'.	C/O TO PBTD OF 68	330'.		
2. RAN GRN-CCL FR 6830' TO 8	5500'. PERFD DRINKARD W	/ 2 JSPF FR 6620'-(6828' (52 INT-104	HLES)	
3. SET PKR @ 5267', TESTED C MAX P = 2590#, AIR = 8.5 BI	SG TO 500#, OK. ACIDIZED PM.	DRINKARD FR 6605'-	-6828' W/ 2000 G	ials 20% ne/	AT.
4. FRACED SAME PERFS W/ 35 MAX P = 4450#, AIR = 25 BP		0 GALS GELLED 20%.			
5. RETURNED WELL TO PRODUC	TION.				
I hereby certify that the information above is true as	nd complete to the best of my knowledge and	belief.			
SIGNATURE That I my		ENGINEER'S ASSIS	TANT	DATE 1-29-93	
TYPEOR PRINT NAME MONTE C. DUNCA	N			пецерноме но 393	3-7191
(This space for State Use)	DV JERRY CEVEAN				
	BY JERRY SEXTON SUPERVISOR			FEB (0 1 1993
APPROVED BY	TITL	e	I	BTAC	

RECEIVED

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OCCUPANTE OFFICE