

Submit 3 Copies
to Appropriate
District Office

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-10166
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name BAKER 'B'
2. Name of Operator Texaco Exploration and Production Inc.	8. Well No. 7
3. Address of Operator P. O. Box 730 Hobbs, NM 88240	9. Pool name or Wildcat TUBB O & G, DRINKARD
4. Well Location Unit Letter J : 1980 Feet From The SOUTH Line and 1980 Feet From The EAST Line Section 10 Township 22S Range 37E NMPM LEA	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3349' DF

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: DOWNHOLE COMMINGLE -- NMOCD # DHC-813 <input checked="" type="checkbox"/>

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.

- 1) 8-3-92 PULL DUAL EQUIPMENT, PACKER, & BRIDGE PLUG. CLEAN OUT TO 6495'.
- 2) SET PACKER @ 6275', ACIDIZE DRINKARD PERFS 6342-6484' W/5000 GAL 20% NEFE
- 3) SET RBP @ 6155', TEST OK, ACIDIZE TUBB PERFS 5942-6062' W/2000 GAL 20% NEFE
- 4) TEST PUMP TUBB 8-18-92. 0 OIL, 11 WTR, 236 MCF, PULL RBP.
- 5) TEST PUMP TUBB & DRINKARD 9-02-92. 7 OIL, 25 WTR, 586 MCF
- 6) REQUEST DOWNHOLE COMMINGLE SPLIT OF:
TUBB 0% OIL, 40% GAS
DRINKARD 100% OIL, 60% GAS

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE L.W. Johnson TITLE ENGR ASST DATE 09-21-92
TYPE OR PRINT NAME L.W. JOHNSON TELEPHONE NO. 393-7191

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

SEP 24 '92