Submit 3 Copies to Appropriate District Office

State of New Mexico

Form C-103 Energy, Minerals and Natural Resources Department Revised 1-1-89 DISTRICT OIL CONSERVATION DIVISION WELL API NO. 30-025-12379 P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE 1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) West Dollarhide Drinkard Unit Type of Well: WELL WELL OTHER Injection 2. Name of Operator 8. Well No. Texaco Exploration & Production, Inc. 79 3. Address of Operator 9. Pool name or Wildcat P.O. Box 3109 Midland, Texas 79702 **B**ollarhide Tubb Drinkard Well Location Unit Letter D: 666 Feet From The North Line and 660 Feet From The West Section 25 S Township Range 38 E **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: OTHER: 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. 1/19/98 CIRC hole w/mud laiden fluid from @ 5702' 2. 1/20/98 Set CICR @ 5702', sqz 60 sx cmt, dumped @ 20' cmt on top 3. 1/21/98 Spot 65 sx cmt @ 4070' to @ 3428' 4. 1/21/98 Spot 25 sx cmt @ 3194' to @ 2947' 5. 1/21/98 Perf $5\frac{1}{2}$ csg @ 2550', set pkr @ 2287' sqz 50 sx cmt 6. 1/22/98 Tagged plug @ 2485' 7. 1/22/98 Perf $5\frac{1}{2}$ csg @ 1271', CIRC 265 sx cmt down $5\frac{1}{2}$ csg & up to surf of 8 5/8 csg 8. 2/2/98 Cut off well head & anchors, built dry hole marker

I hereby certify that the information above is true and complete to the best of my k	mowledge and belief. TITLE PEA Suprevisor	DATE 1-26-98
TYPE OR PRINT NAME		TELEPHONE NO.
(This space for State Use)		Sec. 177.03

TTILE

OU & SAC BISSONS

DATE

CONDITIONS OF APPROVAL, IF ANY