

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box 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 12379

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

B-93125

7. Lease Name or Unit Agreement Name

WEST DOLLARHIDE DRINKARD UNIT

8. Well No.

79

9. Pool Name or Wildcat

DOLLARHIDE TUBB DRINKARD

SUNDY NOTICES AND REPORTS ON WELL
(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 ☐ GAS WELL ☒ OTHER INJECTOR

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

4. Well Location
Unit Letter D 660 Feet From The NORTH Line and 660 Feet From The WEST Line
Section 5 Township 25S Range 38E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3130' DF

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: add perforations and acid stimulate ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

OBJECTIVE: TO ADD PERFORATIONS AND THEN ACID STIMULATE THE DOLLARHIDE DRINKARD TUBB ZONE.

1. RUPU. INSTALL BOP. RELEASE PACKER AND POH WITH TUBING AND PACKER.

2. CLEAN OUT TO PBTD (6797').

3. PERFORATE LINER WITH 2 JSPF OVER THE INTERVAL 6312' - 6432' (172 HOLES).

4. TIH WITH PACKER AND SET AT 6260'. LOAD BACKSIDE.

5. ACID STIMULATE PERFS FROM 6312' - 6492' WITH 5000 GALLON 20% HCL NEFE, 285 BALL SEALERS @ 2-3 BPM.

6. SHUT IN FOR 1 HOUR AND THEN SWAB BACK.

7. RELEASE PACKER AND POH WITH TUBING. TIH WITH INJECTION TUBING AND SET PACKER @ 6200'.

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

SIGNATURE Darrell J. Carriger TITLE Engineering Assistant

DATE 10/26/94

TYPE OR PRINT NAME Darrell J. Carriger

Telephone No. 397-0426

(This space for State Use) ORIGINAL SIGNED BY Darrell J. Carriger

APPROVED BY DISTRICT SUPERVISOR TITLE DISTRICT SUPERVISOR

CONDITIONS OF APPROVAL, IF ANY:

OCT 31 1994