

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.

B-9312

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. ☒ OIL WELL ☐ GAS WELL ☐ OTHER	7. Unit Agreement Name WEST DOLLARHIDE DRYWATER UNIT
2. Name of Operator TEXACO PRODUCING INC.	8. Farm or Lease Name
3. Address of Operator P.O. BOX 728 HUBBS, NEW MEXICO 88240	9. Well No. 38
4. Location of Well UNIT LETTER <u>A</u> , <u>667</u> FEET FROM THE <u>NORTH</u> LINE AND <u>500</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>5</u> TOWNSHIP <u>25S</u> RANGE <u>38E</u> NMPM.	10. Field and Pool, or Wildcat DOLLARHIDE TUBB DRINKARD
15. Elevation (Show whether DF, RT, GR, etc.) 3167' DF	12. County LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☒	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	

17. 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) MISC. PULLRODS AND PUMP
- 2) INSTALL BOP. TOH w/ PRODUCTION TBE.
- 3) TIH AND C/O WELL TO 6800' TOH
- 4) PERFORATE DOLLARHIDE TUBB DRINKARD w/ 26PF at 6538-40, 46-51, 54-57, 59-60, 62-70, 78-80, 82-83, 86-87, 92-94, 6598-6605, 6607.5, 6610-12, 17-24, 26-33, 38-40, 42-44, 6653-65, (162 SHOTS)
- 5) TIH w/ PKR TO 6510' TEST WORKSTRING TO 5000PSI. ACIDIZE DOLLARHIDE TUBB DRINKARD PERFORATIONS w/ 5000 GALLONS 15% NEFC ACID w/ BALL SEALERS.
- 6) SWAB ACID BACK TOH.
- 7) TIH w/ PRODUCTION EQUIPMENT.
- 8) PLACE WELL ON PRODUCTION.

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

SIGNED C. R. Munro TITLE Prod Supervisor DATE 6/22/87

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR

TITLE _____

DATE JUN 25 1987

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JUN 24 1987
OCD
HOBBS OFFICE