## State of Nev: Mexico

Form C-103 Revised 1-1-89

Energy, Minerals and Natural Resources Department

District Office		•	·
DISTRICT I	OIL CONSERVA	TION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088			30 025 12388
DISTRICT II			5. Indicate Type of Lease
P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088			STATE FEE
DISTRICT III			6. State Oil / Gas Lease No.
1000 Rio Brazos Rd., Aztec, NM 87410			B-9312
SUNDRY NOTICES AND REPORTS ON WELL			
(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			MEXICO -L-
(FORM C-101) FOR SUCH PROPOSALS.)			7
1. Type of Well: OIL GAS OTHER			
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.			8. Well No. 24
3. Address of Operator P.O. BOX 730, HOBBS, NM 88240			Pool Name or Wildcat     DOLLARHIDE FUSSELMAN
Unit Letter <u>B</u> : 816 Feet From The <u>NORTH</u> Line and <u>1780</u> Feet From The <u>EAST</u> Line			
Section 5 Township 25S Range 38E NMPM LEA COUNTY			
10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3158'			
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WORK			
TEMPORARILY ABANDON			
PULL OR ALTER CASING		CASING TEST AND CEMEN	
OTHER:		OTHER:	REQUEST TA STATUS
4/13/95: TOH with production equipment. Circulated fresh water.  4/19/95: Set CIBP @ 8365' and capped with 35' cement.  4/20/95: Circulated inhibitor fluid. Tested casing to 500 psi for 30 minutes <held>.  Texaco respectfully requests permission to re-classify the subject well to TA status.  Justification: The subject well is located within the West Dollarhide Drinkard Unit. Texaco would like to hold the wellbore in TA status in the event that it is needed for a replacement well in the future.  The original pressure chart is attached to this form. A copy can be found on the reverse side of this form.</held>			
This Approval of Temporary 5-1-2000, Abandonment Expires 5-1-2000,  Thereby certify that the information pabove is true and complete to the best of pay incollecte and belief.  SIGNATURE DATE 5/9/95  TYPE OR PRINT NAME Darrelli J. Carriger Telephone No. 397-0426			
	arrell J. Carriger		Telephone No. 397-0426
(This space for State Use)  ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT LEURENVICOR			MAY 11 1035

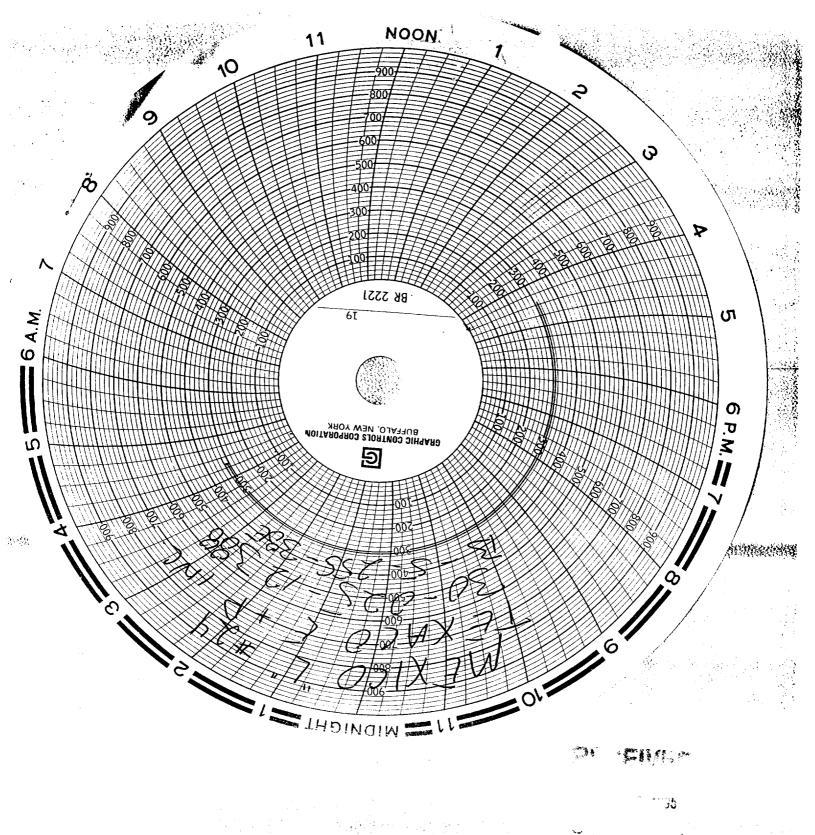
APPROVED BY\_

CONDITIONS OF APPROVAL, IF ANY:

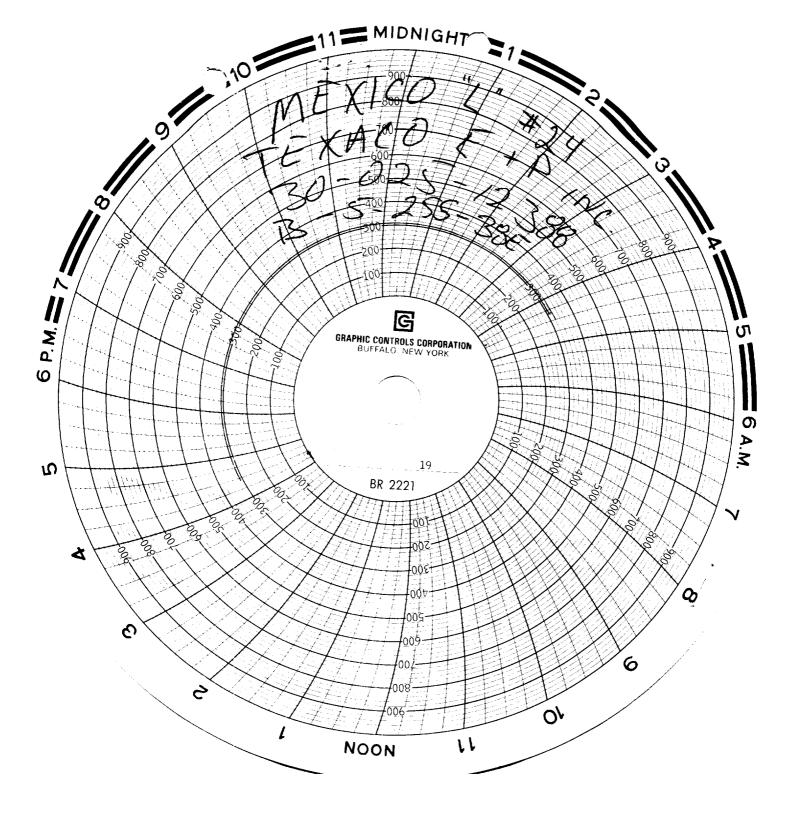
DISTRICT I SUPERVISOR

TITLE

\_DATE\_



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