Submit 3 copies to Appropriate District Office	State of New I Er ', Minerals and Natural R		Form C-103 Revised 1-1-89			
DISTRICT I	OIL CONSERVATI	ON DIVISION				
P.O. Box 1980, Hobbs, NM 88240			WELL API NO.			
DISTRICT II	P.O. Box 208	-	30-025-25672			
P.O. Box Drawer DD, Artesia, NM 88210	Santa Fe, New Mexic	0 87504-2088	5. Indicate Type of Lease STATE 🖌 FEE			
DISTRICT III			6. State Oil / Gas Lease No.			
1000 Rio Brazos Rd., Aztec, NM 87410			B-9312			
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESEI	FICES AND REPORTS ON WEL POSALS TO DRILL OR TO DEEPER RVOIR. USE "APPLICATION FOR F C-101) FOR SUCH PROPOSALS.)	NOR PLUG BACK TO A	7. Lease Name or Unit Agreement Name MEXICO -L-			
1. Type of Well: OIL GAS WELL WELL						
2. Name of Operator TEXACO EXP	PLORATION & PRODUCTION INC.		8. Well No. 26			
3. Address of Operator PO BOX 310	9, MIDLAND, TEXAS 79701		9. Pool Name or Wildcat DOLLARHIDE FUSSELMAN			
4. Well Location						
Unit LetterD:	566 Feet From The NOR	H_Line and <u>860</u>	_Feet From The <u>WEST</u> Line			
Section 5	Township25SF	ange <u>38E</u> NM	PM LEA_COUNTY			
10. Elevation (Show whether DF, RKB, RT,GR, etc.)						
^{11.} Check Ap	propriate Box to Indicate Na	ture of Notice, Report,	, or Other Data			
NOTICE OF INTENTION TO: SU			JBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING			
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL OPERAT				
PULL OR ALTER CASING		CASING TEST AND CEMENT	ГЈОВ			
OTHER:		OTHER:				
work) SEE RULE 1103.			ncluding estimated date of starting any proposed			

1) RU POH lay down rods and pump.

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2) Release TAC POH.
3) RIH with 5.5" casing scraper to 8324' POH.
4) RIH WL and set CIBP 8124" load casing with 2% KCL water and pressure test to 550 psi for 30 min and make chart.
5) If test OK, TIH with tubing to 8120' displace hole with packer fluid TOH.

6) Dump 35' cement on top of plug. (NEW PBTD 8089') 7) Notify Buddy Hill with NMOCD 369-6234 or 393-6161to witness the following test: Fill casing with 2% KCL water, pressure up to 530 PSI and chart for 30 min.

SIGNATURE M.	intar		Engineering Assistant	DATE	6/18/01
TYPE OR PRINT NAME	Mike Quintana			Telephone No.	505-394-9307
(This space for State Use)				, <u>\</u> `	JN 27 200
PPROVED BYTITLE			DATE		
CONDITIONS OF APPROVAL, IF ANY:			5.50 7 5 . it	DeSoto/Nichols	12-93 ver 1.0