

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 31484
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B- 9613
7. Lease Name or Unit Agreement Name	WEST DOLLARHIDE DRINKARD UNIT
8. Well No.	116
9. Pool Name or Wildcat	DOLLARHIDE TUBB DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3161' GL

SUNDRY 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	TEXACO EXPLORATION & PRODUCTION INC.
3. Address of Operator	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter <u>D</u> : <u>67</u> Feet From The <u>NORTH</u> Line and <u>152</u> Feet From The <u>WEST</u> Line Section <u>4</u> Township <u>25-S</u> Range <u>38-E</u> NMPM <u>LEA</u> COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3161' GL

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	OTHER:	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPERATION	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>	OTHER:	<input type="checkbox"/>

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.

12-06-97: MIRU. ATTEMPT TO UNSEAT PUMP. STUCK.
12-08-97: DID MANUAL BACK-OFF ON RDS. SWAB DN TBG. NUBOP. REL TAC. TIH W/TBG.
12-09-97: TIH W/SONIC HAMMER TOOL & ACIDIZED PERFS W/4000 GALS 15% NEFE. FLOWING.
12-10-97: KILL WELL W/25 BW. TIH W/MUD JT, SN, TBG, TAC. NDBOP. FLANGE UP WH. TIH W/GAS ANCHOR, PUMP, SINKER BARS, & RDS.
12-11-97: SPACE OUT WELL & PLACE ON PUMP. LOAD & TEST. RD.
12-13-97 THRU 12-15-97: TESTING
12-22-97: SCALE SQUEEZE W/3 DRUMS TH-793 IN 30 BW & FLSH W/200 BW.
1-08-97: PULLED DUE TO HLE IN TBG.
1-15 THRU 1-29-97: TESTING.
2-06-98: ON 24 HR OPT. PUMPED 26 BO, 171 BW, & 13 MCFD.
FINAL REPORT

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant

DATE 2/17/98

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS

APPROVED BY DISTRICT I SUPERVISOR

TITLE

DATE MAR 08

CONDITIONS OF APPROVAL, IF ANY: