

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.

3002531500

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil / Gas Lease No.

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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

3. Address of Operator
205 E. Bender, HOBBS, NM 88240

4. Well Location
Unit Letter C : 1119 Feet From The NORTH Line and 2322 Feet From The WEST Line
Section 5 Township 25S Range 38E NMPM LEA COUNTY

7. Lease Name or Unit Agreement Name
WEST DOLLARHIDE DRINKARD UNIT

8. Well No.
118

9. Pool Name or Wildcat
DOLLARHIDE TUBB DRINKARD

10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3137', KB-3155'

11. 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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Acidize & Scale Squeeze ☒

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.

2-26-99: MIRU. JAR PUMP LOOSE. TOH W/RDS & PMP. PUMP 700 GALS 15% NEFE DN TBG & FLSH W/31 BBLS PROD WATER. SWAB BACK LOAD. TIH W/PUMP & RDS. CHANGED OUT 10 1" RDS DUE TO WEAR. HANG ON & LOAD & TEST.

3-01-99: RIG DOWN.

3-10-99: ON 24 HR OPT. PUMPED 19 BO, 88 BW, & 7 MCF.

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 3/26/99

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 SEAL TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: