

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 31500
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	W 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'	

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  
P.O. BOX 730, 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

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: ☒ Drill out CIBP

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.

Objective: Remove CIBP

- 1) ACIDIZE DRINKARD PERFS 6328'-6473' W/3000 GAL 15% NE-FE.
- 2) SCALE SQUEEZE DRINKARD PERFS 6328'-6473' W/1 DRUM TECHNI-HIB 756.
- 3) DRILL OUT CIBP @ 6650'. CLEAN OUT TO 7381' (PBSD @ 7400')
- 4) SCALE SQUEEZE UPPER AND LOWER ABO PERFS 6555'-7337' W/2 DRUMS TECHNI-HIB 756.
- 5) TUBED UP WITH SEAT NIPPLE @ 7282'.
- 6) 02-15-94: Pump 50 oil, 305 wtr, 29 MCF  
Previous: Pump 19 oil, 122 wtr, 11 MCF

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

SIGNATURE Larry W. Johnson TITLE Engr Asst DATE 2/25/94  
TYPE OR PRINT NAME Larry W. Johnson Telephone No. 397-0426

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE  DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 28 1994