Form C-103

DeSoto/Nichols 12-93 ver 1.0

State of New Mexico propriate frict Office 19, Minerals and Natural Resources Department Revised 1-1-89 JISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30 025 32369 DISTRICT II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Box Drawer DD, Artesia, NM 88210 STATE . FEE DISTRICT III State Oil / Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 B-1732-1 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI WEST DOLLARHIDE DRINKARD UNIT (FORM C-101) FOR SUCH PROPOSALS. OIL 1. Type of Well: GAS WELL OTHER 2. Name of Operator 8. Well No. **TEXACO EXPLORATION & PRODUCTION INC** 124 3. Address of Operator 9. Pool Name or Wildcat 205 E. Bender, HOBBS, NM 88240 DOLLARHIDE TUBB DRINKARD 4. Well Location Unit Letter C: 300 Feet From The NORTH Line and 1350 Feet From The WEST Township 25-S Range 38-E NMPM LEA COUNTY 10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3162', KB-3173' Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: 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. 8/11/00: MIRU, NDWH, NUBOP, TAG UP @ 6880'. 8/14/00: TIH W/SONIC HAMMER TOOL ON 190 JTS 2 7/8" STOP @ 6240' 8/15/00: ACID WASH DRINKARD PERFS 6250-6890 W/4000 GALS 15% NEFE HCL & 193 BBLS 2% KCL WTR. SCALE SQUEEZE SAME PERFS W/165 GALS TH-756 MIXED IN 100 BBLS 2% KCL WTR & FLSH W/115 BBLS 2% KCL WTR. 8/16/00: TIH W/BPMA, TBG, TAC. TBG @ 6859. SN @ 6832, TAC @ 6180. NDBOP. NUWH. TIH W/GAS ANCHOR, PUMP, SINKER BARS, & RDS. TEST TBG TO 500#-OK. HUNG ON, RIG DOWN, GOING @ 5:00 PM 9/26/00: ON 24 HR OPT. PUMPED 20 BO, 142 BW, & 22 MCF. FINAL REPORT

I hereby certify that the information above to frue a	nd complete to the best of my knowledge and belief.		
SIGNATURE &	use lake TITLE	Engineering Assistant	DATE 9/18/00
TYPE OR PRINT NAME	J. Denise Leake		Telephone No. 397-0405
(This space for State Use)			
APPROVED BYNDITIONS OF APPROVAL, IF AI	NY: TITLE		DATE