Form 3160-5 (June 1990)	UNITED S DEPARTMENT OF	THE INTERIOR	N.M. Oil Co 1825 N. Fre	ons. Divi	FORM APPROVED ISIONBudget Bureau No. 1004-0135 Expires: March 31, 1993
	BUREAU OF LAND	MANAGEMENI	Hobbs, NM		5. Lease Designation and Serial No. NM-10185
Do not use this form f	SUNDRY NOTICES AND for proposals to drill or to APPLICATION FOR PE	o deepen or reent	ry to a different i	eservoir.	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE					7. If Unit or CA, Agreement Designatio
1. Type of Well					West Dollarhide Drinkard Unit
Oil Gas Well Well	Cother Injector				8. Well Name and No. 20
2. Name of Operator Texaco Exploration & Production Inc.					9. API Well No.
3. Address and Telephone No.					30-025-12260
P.O. Box 3109, Midland, Texas 79702 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					10. Field and Pool, or Exploratory Are Dollarhide Tubb Drinkard
Unit Letter H					11. County or Parish, State
2310' FNL & 660'FEL Section 30, T24S, R38E					Lea County, New Mexico
12. CHECK API	12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT,				R OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION				ACTION	
Notice of Int	ent	Abandonment Recompletion Plugging Back Casing Repair			Change of Plans
	_				New Construction
Subsequent	Report				Non-Routine Fracturing
Final Aband	onment Notice	Altering C			Conversion to Injection
		Other			Dispose Water
					(Note: Report results of multiple completion on We Completion or Recompletion Report and Log form
 Notify BLM & OCD MIRU, install BOP, Set CIBP @ 6500' Spot 20 sx cement Spot 20 sx cement Spot 20 sx cement Perf & sqz 40 sx ce Perf & sqz 175 sx cement s 	release packer & POOH w/20 sx cement cap fm 6068-6168' (Tubb) fm 5077-5177' (Glorieta) fm 3640-3740' (Queen) ment fm 3100-3200', WOC/ ment fm 2662-2762', WOC/ ment fm 1271-1371', WOC/ cement @ 333', circulate up 8	Гад (8 5/8'' shoe) Гад (Bottom of salt) Гад (Top of salt) 3 5/8 & 13 3/8 csg, W			
14. I hereby certify that the for Signed	Corlit	Title Facility Eng	ineer ROLEUM ENGI	NEER	Date <u>11/08/99</u> Date NOY 1 5 199 9
Conditions of approval, if any			to any department or ac	ency of the Ur	nited States any false, fictilious or fraudu
Conditions of approval, if any		which willfully to make	to any department or ag	ency of the Ur	nited States any false, fictitious or fraudu

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