

Submit 3 Copies  
to Appropriate  
District Office

District I

P.O. Box 1980, Hobbs, NM 88240

District II

P.O. Drawer DD, Artesia, NM 88210

District III

1000 Rio Brazos Rd. Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Form C-103  
Revised 1-1-89

WELL API NO.	30 - 025 - 12269
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTION	7. Lease Name or Unit agreement Name WEST DOLLARHIDE QN SD UNIT
2. Name of Operator OXY USA INC.	8. Well No. 13
3. Address of Operator P.O. Box 50250 Midland, TX 79710	9. Pool name or Wildcat DOLLARHIDE QUEEN
4. Well Location Unit Letter <u>K</u> : <u>1,650</u> Feet From The <u>SOUTH</u> Line and <u>2,310</u> Feet From The <u>WEST</u> Line Section <u>30</u> Township <u>24 S</u> Range <u>38 E</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3,109	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: REPAIR TBG LEAK <input checked="" 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.

TD - 3980' PBDT - 3845' PERFS - 3605- 3744'

MIRU PU 11/29/94, NDWH, NUBOP, POOH W/ TBG & PKR. RIH W/ EXCHANGE BAKER AD-1 PKR & 2-3/8" TBG & TEST TO 5000#, REPLACE 1 JT TBG. CIRC HOLE W/ PKR FLUID, SET PKR @ 3527', NDBOP, NUWH. PRES CSG TO 400# - 15MIN - HELD OK, RDPU 11/30/94, NMOCD NOTIFIED BUT DID NOT WITNESS. PUT WELL BACK ON INJECTION.

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

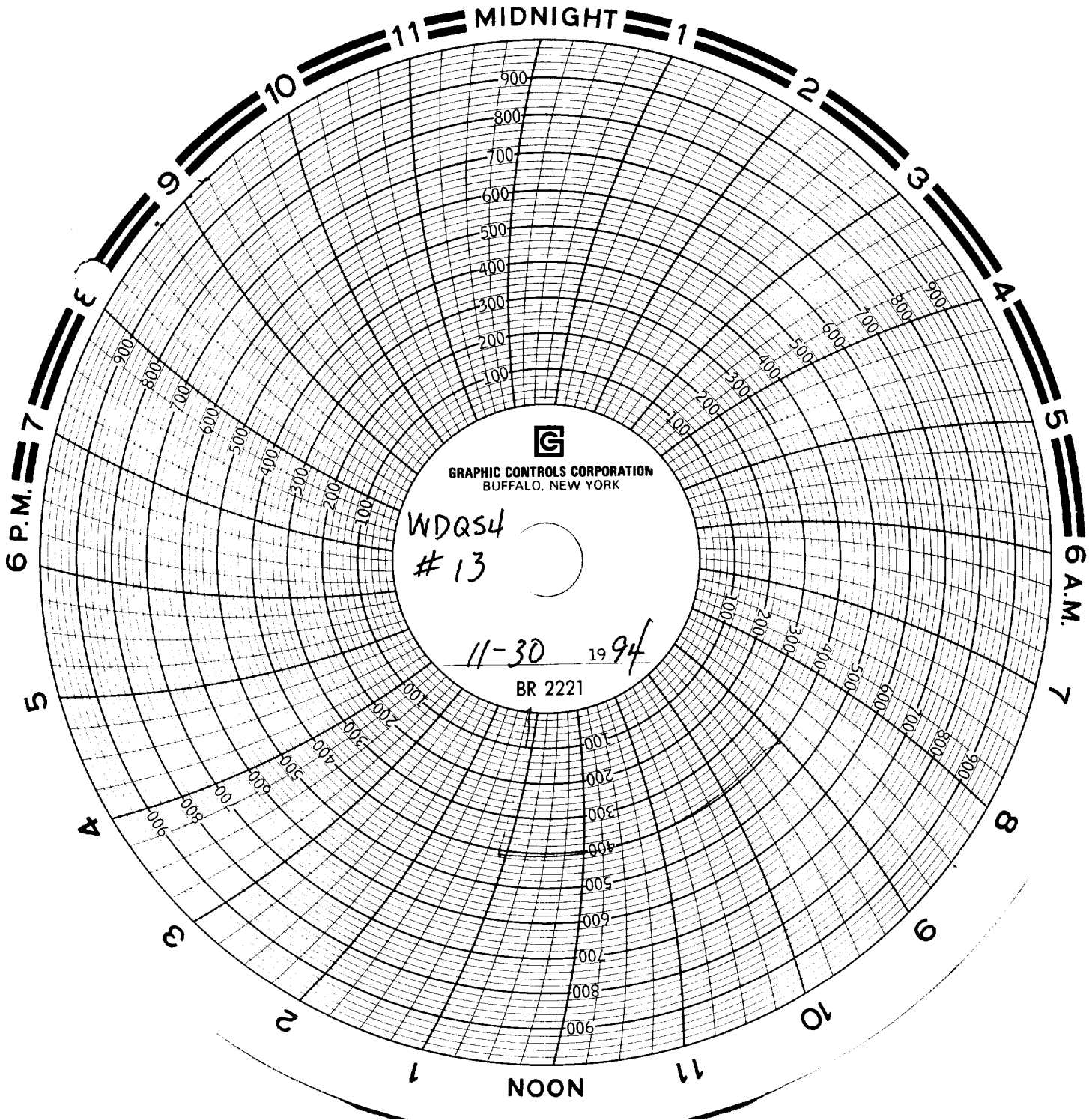
SIGNATURE DAVID STEWART TITLE REGULATORY ANALYST DATE 12 06 94  
TYPE OR PRINT NAME DAVID STEWART TELEPHONE NO. 915 685-5717

(This space for State Use)

APPROVED BY DAVID STEWART TITLE REGULATORY ANALYST

DATE DEC 08 1994

CONDITIONS OF APPROVAL, IF ANY:



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

WDQS4  
#13

11-30 1994

BR 2221

11-30-94  
P. V. S. W. S.  
Reduction Foreman

1534

11-30-94  
Inderguthy dest.