## State of New Mexico Energy, Minerals and Natural Resources Department

Form C	-103
Revised	1-1-89

District Office			
DISTRICT I P.O. Box 1980, Hobbs, NM 8	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO.
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210		30-025-12290  5. Indicate Type of Lease  STATE  FEE XX	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.  7. Lease Name or Unit Agreement Name  West Dollarhide Queen
SUNDRY NOTICES AND REPORTS ON WELLS  (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	r Injection	Sand Unit
2. Name of Operator			8. Well No. 47
Sirgo Oper  3. Address of Operator	ating, Inc.		9. Pool name or Wildcat
, -	531, Midland, Texas 797	02	Dollarhide Queen
4. Well Location  Unit Letter	: 330 Feet From The South	Line and 165	50 Feet From The East Line
Section 31	Township 24S R	ange 38E	NMPM Lea County
	10. Elevation (Show whether	DF, RKB, RT, GR, etc.)	
	Check Appropriate Box to Indicate	Nature of Notice R	Peport or Other Data
II.	OF INTENTION TO:		SSEQUENT REPORT OF:
		REMEDIAL WORK	ALTERING CASING
PERFORM REMEDIAL WOF			
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	
PULL OR ALTER CASING		CASING TEST AND C	an out well X
OTHER:		OTHER: CIE	in out well
12. Describe Proposed or Comwork) SEE RULE 1103.	pleted Operations (Clearly state all pertinent details, a	and give pertinent dates, incli	uding estimated date of starting any proposed
11-11-89	RU coil tbg unit & jet Put on injection.	wash tbg & c	sg to TD (3935').
11-12-89	Injecting 310 BWPD @ 13	300#.	
11-13-89	RU kill truck & acidize well w/6 bbls 15% NEFE acid & flush w/30 bbls fresh water. SI. Return to injection.		
	Injecting: 251 BWPD @	1325#.	
I hereby certify that the informati	on above is true and complete to the best of my knowledge an	nd belief.	
SIGNATURE DOWN	u ttuster 1	me Production	n Technician pate 12-5-89
TYPE OR PRINT NAME			TELEPHONE NO.
(This space for State Use)	Orig. Signed by Paul Kautz Geologist		DEC 0 7 1989
0.1889 P.V	GOULOGISE	TILE	DATE