

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	3002512292
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name West Dollarhide Drinkard Unit	
8. Well No.	67
9. Pool name or Wildcat	Dollarhie Tubbs Drinkard
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3116' GR	

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> <i>WJW</i>	2. Name of Operator Texaco E&P, Inc.
3. Address of Operator P. O. Box 730 - Hobbs, NM 88240	4. Well Location Unit Letter <u>P</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>31</u> Township <u>245</u> Range <u>38E</u> NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input 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.

40 sacks @ 3500'  
25 sacks @ 2600'  
25 sacks @ 1350'  
50 sacks @ 350' to 0'

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

SIGNATURE Jim Calder TITLE P&A Supervisor (Agent-Pool) DATE 7/27/94

TYPE OR PRINT NAME Jim Calder

TELEPHONE NO. 1800543-6772

PRINT NAME FOR STATE USE

APPROVED BY Charles Perry

OIL & GAS INSPECTOR

MAY 25 1995

CONDITIONS OF APPROVAL, IF ANY:

PAID TWO  
C-7  
SAD

RECEIVED

AUG 16 1994

OFFICE