District Office	State of New Me nerg inerals and Natural Res	sources Department		Form C-103 Revised 1-1-89
	L CONSERVATIO	ON DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088		30 025 1231	0
DISTRICT II P.O. Box Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	87504-2088	5. Indicate Type of Lease STA	
DISTRICT III			6. State Oil / Gas Lease No.	
1000 Rio Brazos Rd., Aztec, NM 87410				- 9311
SUNDRY NOTICES AND REPORTS ON WELL (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.)			7. Lease Name or Unit Agree WEST DOLLARHIDE DRIN	
1. Type of Well: OIL GAS WELL WELL	OTHER INJECTOR			
2. Name of Operator TEXACO EXPLOR/	ATION & PRODUCTION INC.		8. Well No. 71	
3. Address of Operator P.O. BOX 730, HO	BBS, NM 88240		9. Pool Name or Wildcat DOLLARHIDE TUBE	
4. Well Location				
Unit Letter P 810	Feet From The SOUT	H Line and 510	Feet From The <u>EAST</u>	Line
Section <u>32</u> Tow	mship24SRa	ange38ENM	PM LEA	
10.	Elevation (Show whether DF, RKE	B, RT,GR, etc.)		
11. Check Approp	priate Box to Indicate Nati	ure of Notice, Report	, or Other Data	
NOTICE OF INTENTION TO	O:	SU	IBSEQUENT REPOR	RT OF:
	_	REMEDIAL WORK	ALTERING CA	SING
	NGE PLANS	COMMENCE DRILLING OPE	RATION PLUG AND AB	
		CASING TEST AND CEMEN	іт јов 🔲	
OTHER: PERFORATE AND ACID	STIMULATE	OTHER:		🛛
12. Describe Proposed or Completed Operational any proposed work) SEE RULE 1103.	ons (Clearly state all pertinent o	details, and give pertiner	nt dates, including estimated	date of starting
Objective: To add perforations to the Dollarhide	Tubb Drinkard and then acid stin	nulate zone.		
1. RUPU. Install BOP. TOH with tubing and particular terms of the second s	acker.			
2. Rlh with 3-1/8" bit on workstring and clean or	ut to 6850'.			
3. Run GR-CNL log from 6850' - 5850'. Pick pe	erfs from log and perf with 2 jspf v	with a 2-1/8" gun and .45" I	holes.	
 TIH with packer and set at 6350'. Acid stimu pmax = 4000psi, 2 - 3 bbl/min. 	ulate zone with 6000 gallons 20%	hcl NEFE and ball sealers	i	
5. Swab back load and POH with packer and tu	ibing.			
6. Set new packer 100' above uppermost perfor	ation. Pressure test casing.			
7. Return to injection.				

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hereby certify that the information abo	TITLE Engineering Assistant	DATE
	Darrell J. Carriger	Telephone No. 397-0426
This space for State Use)		NOV 24 1994
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		DeSoto/Nichols 10-94 ver 2.0