

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box 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.	3002512334
5. Indicate Type of Lease	STATE ☒ FEE ☐
6. State Oil / Gas Lease No.	B-1732
7. Lease Name or Unit Agreement Name	WEST DOLLARHIDE DRINKARD UNIT
8. Well No.	72
9. Pool Name or Wildcat	DOLLARHIDE TUBB DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3163' GL

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.)

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Injection well

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

4. Well Location
Unit Letter M : 330 Feet From The SOUTH Line and 660 Feet From The WEST Line
Section 33 Township 24S Range 38E NMPM LEA COUNTY

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☒ Convert to Injection

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.

Objective: Convert to Injection

- 1) MIRU, pulled rods and pump, installed BOP. Pulled tubing
- 2) Cleaned 5 1/2" casing to 6865', ran casing inspection log 2500-6860'.
- 3) Set 5 1/2" CIBP @ 6630', capped w/15' cmt, new PBTD= 6615'
- 5) Acidized perms 6464-6594' w/3K gal 15% NEFE
- 6) Ran 2 3/8" IPC Inj tbg w/5 1/2" packer set @ 6450', tested csg/tbg annulus to 500# 30 min. (Chart attached, copy on reverse side)
- 7) 06-13-94: Inj 361 BWPD @ 550# (Max PSI= 1293# @ 0.2 PSI/FT)

RE: WFX- 654

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

SIGNATURE Larry W. Johnson TITLE Engineering Assistant DATE 6/27/94

TYPE OR PRINT NAME Larry W. Johnson Telephone No. 397-0426

(This space for State Use)

APPROVED BY JOEY SEXTON TITLE DISTRICT I SUPERVISOR DATE JUL 07 1994

CONDITIONS OF APPROVAL, IF ANY:

