

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION
P.O. BOX 198
HOBBS, NEW MEXICO 88240

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC

3. Address and Telephone No. P.O. BOX 730, HOBBS, NM 88240 397-0426

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter H : 1980 Feet From The NORTH Line and 990 Feet From The

EAST Line Section 31 Township 24S Range 38E

5. Lease Designation and Serial No.
NM-10186

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
WEST DOLLARHIDE DRINKARD UNIT
91

9. API Well No.
3002524035

10. Field and Pool, Exploatory Area
DOLLARHIDE TUBB DRINKARD

11. County or Parish, State
LEA, NEW MEXICO

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Attering Casing
	<input type="checkbox"/> OTHER: _____
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

- MIRU. POH w/rods and pump. NU BOP. Pulled tubing.
- Drilled cement retainer, c/o from 6800' to 7450', circulated hole clean. TOH.
- RU lubricator and perforated 4 1/2" liner (Lower Abo) w/ 2 SPF (120 holes) @ 7149'-52', 7178'-80', 7184'-91', 7219'-25', 7249'-52', 7264'-67', 7270'-73', 7296'-99', 7311'-18', 7327'-33', 7338'-44'.
- TIH w/ 4-1/2" treating packer on the workstring to 7343' and spotted 200 gals of 20% NEFE, HCl acid. Set packer @ 6837'. Acidized perforations (7149'-7344') with 5K gal of 20% NEFE, HCl acid in 3 stages. Average Rate: 5.2 bpm. Max PSI=4180#, ISIP=1050# Swabbed back load.
- TOH w/treating packer and RBP. TIH w/ production tubing. ND BOP. Ran rods and pump. Returned to production.
- 05/08/94: Pump 43 oil, 183 wtr, 60 MCF
(Prior: Pump 12 oil, 55 wtr, 20 MCF)

L. Johnson

RECEIVED
JUN 23 11 37 AM '94
CATH
ARL

14. I hereby certify that the foregoing is true and correct

SIGNATURE *L. Johnson* TITLE Engineering Assistant DATE 6/27/94

TYPE OR PRINT NAME Larry W. Johnson

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.