STATE OF NEW MEXICO ENERGY AND MIRITARIA DEPARTMENT

	•
SANTA FE	
FILE	
V.1.0.1.	
LAND OFFICE	
OPERATOR	

CONDITIONS OF APPROVAL, IF ANY:

UIL CONSERVATION DIVISION

Form 1-103

D STRINGT CH	P O BOX		Revised 10-1-79
FILE	SANTA FE, NEW	MEXICO 87501	5a. Indicate Type of Leuse
V.8.0.5.	<u> </u>		State X Fee
LAND OFFICE			5. State Oli & Gas Lease No.
OPERATOR			В-9613
SLIN	IDRY NOTICES AND REPORTS ON	WFIIS	
(DO MOT USE THIS FORM FOR USE "APPLI	IDRY NOTICES AND REPORTS ON PROPERTY OF PLUE BY	ACR TO A DIFFERENT RESERVOIR,	
	OTNES-		7. Unit Agreement Name
. Name of Operator			8. Form or Lease Hame West Dollarhide
Texaco Producing	Inc.		Drinkard Unit
1. Address of Operator	00040		
P. O. Box 728, H	lobbs, New Mexico 88240		93 10. Field and Pool, or Wildcat
	1535 North	2575	1
WHIT LETTER	1535 FEET FROM THE North	LINE AND FEET FROM	
THE East LINE, SE	ection 32 Township 24-S	RANGE 38-E NMPM.	
THIIIIIIIII	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	3185 GR		Lea
16. Chec	ck Appropriate Box To Indicate N	lature of Notice, Report or Otl	ner Data
NOTICE OF	F INTENTION TO:	SUBSEQUENT	REPORT OF:
	🗀		ALTERING CASING
FERFORM *C	PLUE AND ABANDON	COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
Pote on At lea casing		OTHER	
OTHER			·
17. Describe Proposed or Complete work) SEE RULE 1103.	ed Operations (Clearly state all pertinent det	lails, and give pertinent dates, including	estimated date of starting any proposed
We propose to an	mend the casing and cementing	ng program as follows:	
1400 sacks H	8-5/8" casing to 4000' 8-5/8 HLW w/16# Salt, 1/4# Flocel lass "H" w/2% CaCl2 (15.8 p	e/sack (12.9 ppg, 2.07 cu	1600 sacks cement. . ft./sx.) followed by
2. DV tool on	5-1/2" casing will be at 50	00' and 1200 sacks cement	will be used in
cementing. 1st Stage: 250 sacks HLW w/10 $\#$ Salt & .6 $\%$ Halad-9/sack followed by 200 sacks 50/50			
Poz (H) w/5# Salt, .6% Halad-9/sack. 2nd Stage: 550 sacks HLW w/10# Salt/sack followed by 200 sacks 50			
	550 sacks HLW w/10# Salt/sa sack.	ck followed by 200 sacks	30/30 POZ H W/20# Salt/
18. I hereby certify that the inform	nation above is true and complete to the best		
w.b.	, W	. B. Cade District Operations Manage	r 3/01/88
\$16HC0	TITLE D		DATE
ORIGINAL SIGNI	ED BY JERRY SEXTON		MAR 7 - 1988
APPROVES BYDISTRICT	1 30F BE VISUR 11TLE		

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