

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. 30-025-30824
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-9613
7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT
8. Well No. 102
9. Pool name or Wildcat DOLLARHIDE TUBB DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3165', KB-3179'

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"/>	2. Name of Operator TEXACO PRODUCING INC.
3. Address of Operator P. O. Box 3109 Midland, Texas 79702	4. Well Location Unit Letter <u>K</u> : <u>2446</u> Feet From The <u>SOUTH</u> Line and <u>1342</u> Feet From The <u>WEST</u> Line Section <u>32</u> Township <u>24-SOUTH</u> Range <u>38-EAST</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3165', KB-3179'	

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: COMPLETION <input checked="" 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.

1. MIRU CLARKE UNIT. INSTALL BOP & TEST TO 3000#. CLEAN OUT CASING TO PBTD OF 6864'. TESTED CASING TO 3000# FOR 30 MINUTES 01-14-91.
2. UNION RAN GR-CCL. PERFED w/ 1 JSPF: 6659-65, 6675-78, 6687-89, 6732-34, 6737-40, 6749-50, 6756-59, 6764-67, 6771-73, 6779-81. 27 HOLES.
3. HALLIBURTON ACIDIZED w/ 4200 GAL 15% NEFE. SWAB 9 HOURS 01-16-91. RECOVERED 15 BNO & 138 BLW.
4. TIH & SET RBP @ 6635'. TESTED TO 3000#. PERFED w/ 1 JSPF: 6442-44, 6450-61, 6464-75, 6479-84, 6496-6509, 6514-16, 6526-34, 6543-44, 6558-64, 6588-90, 6612-14. 63 HOLES.
5. HALLIBURTON ACIDIZED w/ 6200 GAL 15% NEFE. FLOWED 120 BNO & 100 BLW IN 9 HOURS. 01-19-91.
6. TOH WITH RBP. TIH WITH 2 7/8 TUBING, PUMP & RODS. SEATING NIPPLE @ 6815'.
7. PUMPED 24 HOURS ON POTENTIAL TEST 01-27-91. RECOVERED 339 BNO, 5 BLW & 76 MCF.

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

SIGNATURE C. P. Basham / cwB TITLE DRILLING SUPERINTENDENT DATE 01-28-91
TYPE OR PRINT NAME C. P. BASHAM TELEPHONE NO. 915-6884620

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: