## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

Switter 5 Copie	۰
to Appropriate District Office	
to reproprie	
District Office	
<b>5</b>	

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

30-025-30824		
5. Indicate Type of Le	STATE X	FEE 🗌

P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease  STATE X FEE				
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No. B-9613				
SUNDRY NOTICES AND REPORTS ON WELLS					
( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BA	CK TO A  7. Lease Name or Unit Agreement Name				
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	WEST DOLLARHIDE DRINKARD UNIT				
1. Type of Well:					
OE GAS WELL OTHER					
2. Name of Operator	B. Well No.				
TEXACO PRODUCING INC.	102				
3. Address of Operator P. O. Box 3109 Midland, Texas 79702	9. Pool name or Wildcat				
4. Well Location	DOLLARHIDE TUBB DRINKARD				
Unit Letter K : 2446 Feet From The SOUTH Line a	nd 1342 Feet From The WEST Line				
Onk Least ; rect rich inc					
Section 32 Township 24-SOUTH Range 38-EA	AST NMPM LEA County				
10. Elevation (Show whether DF, RKB, RT,	GR, etc.)				
GR-3165', KB-3179'	Visites Person on Other Date				
11. Check Appropriate Box to Indicate Nature of I					
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL	. WORK ALTERING CASING				
	CE DRILLING OPNS. PLUG AND ABANDONMENT				
PULL OR ALTER CASING CASING TO	EST AND CEMENT JOB 🔼				
OTHER: OTHER:_	NTERMEDIATE CASING				
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. DRILL 11 inch HOLE TO 3900'. TD @ 8:15am 12-22-90. 2. RAN 30 JTS OF 8 5/8, 32#, S-80 AND 61 JTS OF 32#, K-55 ST&C 10 CENTRALIZERS. 3. HALLIBURTON CEMENTED: 1st STAGE - 700 SACKS CLASS H w/ 5% 23-90. CIRCULATED 75 SACKS. 2nd STAGE - 1650 SACKS CLASS H w 00am 12-23-90. CIRCULATED 250 SACKS. 4. INSTALL WELLHEAD & TEST TO 1500#. NU BOP & TEST TO 3000#.	SALT @ 15.6ppg. OPEN DV TOOL @ 3:15am 12-				

I hereby certify that the info	rmation above is true and complete to the best of my knowledge		12_26_90
SKONATURE C.P. Basham/CWH		TITLE DRILLING SUPERINTENDENT	DATE 12-26-90 TELEPHONE NO. 915-6884620
TYPE OR PRINT NAME C.	P. BASHAM		TELEPHONE NO. 313-0004020
(This space for State Use)	ORIGINAL SIGNED BY JERRY SKXYON DISTRICT I SUPERVISOR	TILE	DATE -
APPROVED BY		••••	

RECEIVED

DEC 2 8 1890