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	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-025-30824	4	
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	5 TO		5. Indicate Type of	Lease STATE X FEE	
1000 Rio Brazos Rd., Azzec, NM 87410			6. State Oil & Gas B-9613		
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.)			7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT		
1. Type of Well: Off Well X Well OTHER					
2. Name of Operator TEXACO PRODUCING INC.			8. Well No. 102		
3. Address of Operator P. O. Box 3109 Midland, Texas 79702			9. Pool name or Wildcet DOLLARHIDE TUBB DRINKARD		
Unit Letter K: 2446 Feet From The SOUTH Line and 1342 Feet From The WEST Line Section 32 Township 24-SOUTH Range 38-EAST NMPM LEA County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3165' Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
			BSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING CASING T		CASING TEST AND CE	NG TEST AND CEMENT JOB		
OTHER: EXTEND PERMIT EXPIRAT	ON DATE X	OTHER:			
12. Describe Proposed or Completed Operation work) SEE RULE 1103. DUE TO DRILLING PRIORITY AND 1990 EXPIRATION DATE.					
PLEASE EXTEND THIS PERMIT F	OR AN ADDITIONAL SIX (6) MO	NTHS.			

I hereby certify that the information above is true and complete to the best of my knowledge and belief.							
BIGNATURE C.P. Ba	chem/cwH	TITLE DRILLING SUPERINTENDENT	DATE 09-04-90				
TYPE OR PRINT NAME C. P.	BASHAM		TBLEPHONE NO. 915-6884620				
(This space for State Use)	Paul Kautz Geologist						
APTROVED BY	Geologist	тть	DATB				

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY-

Expires 3-21-91