State of New Mexico							Form C-103		
mit 3 copies spropriate Energy, Is. Lerals and Natural Resources Department trict Office							Revised 1-1-89	39	
STRICT 1	OII	CONCEDY	A TIC	N DIVISION	WELL API NO.			\neg	
——— OIL COMBERTING						3002530876			
1 :O. Box 2000					5. Indicate Typ			\dashv	
Santa Fe, New Mexico 87504-2088 3. Box Drawer DD, Artesia, NM 88210						STATE [FEE	ן כ	
STRICT III					6. State Oil / G				
000 Rio Brazos Rd., Aztec, NM 87410						LC-0679	108		
SUNDRY NOTICES AND REPORTS ON WELL (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			
. Type of Well: OIL SAS OTHER								_	
. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.						99			
:. Address of Operator 205 E. Bender, HOBBS, NM 88240					9. Pool Name or Wildcat DOLLARHIDE TUBB DRINKARD				
1. Well Location Unit Letter O: 1108 Feet From The SOUTH Line and 1394 Feet From The EAST Line									
	Towns	ship 24S	R	ange 38E NN	иРМ	LEA CO	UNTY		
10. Elevation (Show whether DF, RKB, RT,GR, etc.)									
11.	Check Appropr	iate Box to Indica	ate Nat	ture of Notice, Repor	t, or Other D	ata			
NOTICE OF I						NT REPORT ()F:		
NOTICE OF INTENTION TO.						ALTERING CASING	Ε	J	
PERFORM REMEDIAL WORK					ERATION [PLUG AND ABANDO	ONMENT [
TEMPORARILY ABANDON LI CASING TEST AND CEME					-				
PULL OR ALTER CASING				OTHER:		FRAC DRINKARD	🗵	X	
OTHER:									
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.									
6-30-98: MIRU. UNSEAT PUMP. PULL UP 42' STUCK PUMP. BACK OFF RODS. TOH W/ROD, LINER. NDWH. NUBOP. UNSET ANCHOR. WRK TBG FREE. TOH W/TBG DRAGGING. TOH W/TBG, SN, & OPSMA. TBG SET @ 6824'. 7-01-98: TIH W/BIT & CSG SCRAPER ON 2 7/8" TBG TO 6780'. WELLCHECK TBG OUT OF HLE. SET CIBP @ 6670'. COLLAR @ 6673'. TIH W/BIL RESET SET SET SET SET SET SET SET SET SET									
I hereby certify that the information ab	Gensel	Yake TITLE		ineering Assistant			3/98 397-0405		
TYPE OR PRINT NAME	J. Denis	se Leake				Telephone N o.			

(This space for State Use)

OBline

TITLE

DATE