

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box 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 31482
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B9613
7. Lease Name or Unit Agreement Name	WEST DOLLARHIDE DRINKARD UNIT
8. Well No.	113
9. Pool Name or Wildcat	DOLLARHIDE TUBB DRINKARD

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (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 EXPLORATION & PRODUCTION INC.
3. Address of Operator	205 E. Bender, HOBBS, NM 88240
4. Well Location	Unit Letter <u>M</u> : <u>136</u> Feet From The <u>SOUTH</u> Line and <u>1246</u> Feet From The <u>EAST</u> Line Section <u>32</u> Township <u>24S</u> Range <u>38E</u> NMPM LEA COUNTY
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3140'

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	SET CIBP & ACIDIZE <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.

8-02-00: MIRU. NDWH. NUBOP. TIH W/BIT & CSG SCRAPER ON TBG TO 6530'. PULL TO 6011'.
8-03-00: TIH W/GR/CCL & LOG FROM 6725-6380'. TIH W/CIBP & SET @ 6495'. TIH W/SONIC HAMMER TOOL ON TBG. STOP SONIC HAMMER @ 6250'.
8-04-00: TIH W/SONIC HAMMER & TBG TO 6308'. ACID WASH DRINKARD CSG PERFS 6308-6366' W/4000 GALS 15% NEFE HCL & 148 BBLS 2% KCL WTR. SCALE SQUEEZE SAME PERFS W/SONIC HAMMER W/165 GALS TH-756 MIXED IN 60 BBLS 2% KCL WTR. FLSH W/70 BBLS 2% KCL WTR. PULL TO 6250'.
8-07-00: TIH W/OPMA, SN, TBG, TAC. OPMA @ 6459'. SN @ 6428'. TAC @ 6264'. NDBOP. NUWH. TIH W/GAS ANCHOR, PUMP, K-BARS, RDS. HANG WELL. LOAD/PSI. PUMPING TEE BAD.
8-08-00: CHANGE OUT PUMPING TEE. LOAD/PSI/CHECK PUMP ACTION-OK. RIG DOWN.
9-13-00: ON 24 HR OPT. PUMPING 14 BO, 138 BW & 11 MCF.
FINAL REPORT

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

SIGNATURE J. Denise Leake TITLE Engineering Assistant

DATE 10/11/00

TYPE OR PRINT NAME J. Denise Leake

Telephone No. 397-0405

(This space for State Use)

APPROVED

CONDITIONS OF APPROVAL IF ANY:

TITLE

DATE

