State of New Mexico

Submit 3 copies to Appropriate District Office

Form C-103 Revised 1-1-89

Ainerals and Natural Resources Department Ene

<u>DISTRICT I</u>	OIL CONSERVAT	ION DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2		30 025 31482	
DISTRICT II	Santa Fe, New Mex		5. Indicate Type of Lease	
P.O. Box Drawer DD, Artesia, NM 88210	Janua (C, NEW MEX	100 01 00+ 2000	STATE FEE	
DISTRICT III			6. State Oil / Gas Lease No.	
1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NO	TICES AND REPORTS ON W	ELL		
(DO NOT USE THIS FORM FOR PRO DIFFERENT RESE	POSALS TO DRILL OR TO DEEP RVOIR. USE "APPLICATION FOR C-101) FOR SUCH PROPOSALS.	EN OR PLUG BACK TO A R PERMIT	7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT	
Type of Well: OIL GAS WELL WEL				
Name of Operator TEXACO EX	PLORATION & PRODUCTION INC	D	8. Well No. 113	
3. Address of Operator P.O. BOX 73	0, HOBBS, NM 88240		9. Pool Name or Wildcat DOLLARHIDE TUBB DRINKARD	
4. Well Location				
Unit LetterM:	136 Feet From The SC	UTH Line and 1246	Feet From The <u>EAST</u> Line	
Section 32	Township 24S	Range 38E NM	MPM <u>LEA</u> COUNTY	
	10. Elevation (Show whether DF, RI	KB, RT,GR, etc.) 3140'		
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION	ON TO:	St	JBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPE	ERATION PLUG AND ABANDONMENT	
PULL OR ALTER CASING	_	CASING TEST AND CEMEN	IT JOB	
OTHER:		OTHER:	fracture treated well	
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.				
1/13/95: MIRU X-Pert. TOH with production equipment. Install BOP. 1/14/95: Cleaned out to 6500' with casing scraper. Set CIBP @ 6480' and capped with 10' cement (new PBTD @ 6470'). Perforated 5-1/2" casing with 8 jspf form 6356'-6366'. 1/16/95: Ran packer and set @ 6202'. Loaded annulas with 10# brine. Tested to 500 psi. <held>.</held>				
1/17/95: Performed 300 bbl mini-frac. Fracture stimulated with 54000 gallons gel + 153560# 20/40 sand, Pmax=5800psi, Pmin=4460psi, AIR=40 BPM. 1/18/95 - 1/20/95: Flow well back to fracture tank. 1/21/95: Ran production equipment (2.5" x 1.75" x 26' pump, 2-7/8" tubing to 6254').				
1/23/95 - 2/2/95: tested				
2/3/95: Final test: 120 BO, 377 BW, 56 MCF (24 hours, pumping)				
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I hereby certify that the information above is	style and complete to the best of my knowledge and besief.	
SIGNATURE	TITLE Engineering Assistant	DATE <u>5/9/95</u>
TYPE OR PRINT NAME	Darrell J. Carriger	Telephone No. 397-0426
(This space for State Use)	IGINAL SIGNED BY JERRY SEXTON	
APPROVED BY	DISTRICT I SUPERVISOR TITLE	DATE NOV 11 1005

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