

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 31996
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	B-9613
7. Lease Name or Unit Agreement Name	WEST DOLLARHIDE DRINKARD UNIT
8. Well No.	132
9. Pool Name or Wildcat	DOLLARHIDE TUBB DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3201', KB-3214'	

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.)

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>D</u> : <u>115</u> Feet From The <u>NORTH</u> Line and <u>100</u> Feet From The <u>WEST</u> Line Section <u>33</u> Township <u>24-SO</u> Range <u>38-EA</u> NMPM <u>LEA</u> COUNTY

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: <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.

10-28-96: Move in; rig up Pride. Pull rods & pump. Install BOP. Shut in.
 10-29-96: Ran bit & Casing Scraper 7156'. POH. Set CIBP @ 7110'. Spot 35' cement from 7110'-7075' (New PBTD). Shut in.
 10-30-96: Perf TUBB Zone w/2 jsf @ 6338'-6354' & 6418'-6442' (80.52" holes). Shut in.
 10-31-96: Ran RBP & Packer. Set RBP @ 6750'. Test RBP to 3000 psi-Held. Set Packer @ 6519'. XL Scale Squeezed Drinkard perfs, 6582'-6710', r.
 Dowell acidized Drinkard perfs, 6582'-6710', w/5000 gal 15% NE-FE in 5 equal stages using 500# rock salt blocks between stages
 Flush w/39 bbls produced water. Max pres=2610 psi. Min Pres=1950 psi. ISIP=1542 psi. 15 Min SIP=1217 psi. Avg rate=4.5 BPM. Total load=217 Bbls.
 Shut in.
 11-1-96: Release PKR & lower to 6735'-tag salt. Wash out salt to 6750'. Release RBP & TOH. TIH W/RBP & PKR. Set RBP @ 6495'. Set PKR @ 6490'.
 Test to 3000 psi-OK. Set PKR @ 6292'. Acidize Tubb perfs. 6338'-6442' W/3000 gals 15% NE-FE using 140-7/8 BS. MAXPRESS=3600 psi, AVG=2200
 psi, AIR=4.2 BPM, ISIP=2071 psi, 5 MIN SIP=1559 psi, 10 MIN SIP=1550 psi, 15 MIN SIP=1541 psi. Bled well off. Release PKR & TOH w/ TBG. & PKR
 SDFN
 11-02-96: Ran production equipment, 2 7/8' tubing set @ (6264.21'). Remove BOP. Ran pump & rods. Rig down. On production at 3:00 pm.
 11-03-96 thru 11-24-96: Pumping & Testing Tubb Zone.
 11-25-96: Move in; rig up Pride. Pull rods & pump. Install BOP. POH. Ran retrieving tool to 3200'. Shut in.
 11-26-96: Release RBP at 6495'. Ran production equipment & set tbg @ (6221.74'). Remove BOP. Shut in.s.
 11-27-96: Ran pump & rods, rig down. On production at 1:00 pm.
 11-28-96 thru 12-4-96: Pumping & Testing.
 12-05-96: On 24 hour POTENTIAL TEST ending 10:00 am. Pumped 48 Bbls Oil, 101 Bbls Water, & 20 mcf Gas.

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

SIGNATURE Paula S. Ives TITLE Engineering Assistant DATE 12/13/96
 TYPE OR PRINT NAME Paula S. Ives Telephone No. 397-0432

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY: