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

OIL CONSERVATION DIVISION

WELL API NO.

O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 Santa Fe, New Mexico 87504-2088 O. Drawer DD, Artesia, NM 88210		30-025-32015	
		5. Indicate Type of Lease STATE X FEE	
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.)			6. State Oil & Gas Lease No. B-9613
			7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT
Type of Well: OIL GAS WELL WELL	OTHER WATER I	NJECTION	
2. Name of Operator TEXACO EXPLORATION AND PRODUCTION INC.			8. Well No. 130
3 Address of Operator			9. Pool name or Wildcat
P. O. Box 3109 Midla	ind, Texas 79702		DOLLARHIDE TUBB DRINKARD
L Well Location Unit Letter _G : : 2000	Feet From The NORTH	Line and	1900 Feet From The EAST Lin
Section 32	Township 24-SOUTH Ra	inge 38-EAST	NMPM LEA County
	10. Elevation (Show whether GR-3195', KB-3208	,	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
Check A	ppropriate Box to Indicate	Nature of Notice, I	Report, or Other Data
NOTICE OF INTI		SUI	BSEQUENT REPORT OF:
ERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	
PULL OR ALTER CASING	-	CASING TEST AND	
OTHER:		OTHER: PRODUCTI	ION OAGING
12. Describe Proposed or Completed Operati work) SEE RULE 1103.	ons (Clearly state all pertinent details, a	und give pertinent dates, inc	luding estimated date of starting any proposed
1. DRILLED 7 7/8 HOLE TO 757 2. HLS RAN GR-DLL-MSFL, GR- 3. RAN 37 JOINTS OF 5 1/2, 1 7575'. 4. DOWELL CEMENTED WITH 1: 1.94 CF/S). F/B 500 SACKS CI CIRCULATE CEMENT. 5. RAN TEMPERATURE SURVEY. 6. ND. RELEASE RIG @ 1:30 PM 7. PREP TO COMPLETE.	-CSL FROM 7572 TO 5000 7# L-80, 29 JOINTS OF 17# 300 SACKS 35/65 POZ CLAS LASS H (15.6 PPG, 1.18 CF, TOP OF CEMENT @ 1500'.	WC-50 & 112 JOI	% SALT. 1/4# FLOCELE (12.8 PPG,
I hereby certify that the information above is true SIGNATURE C. P. BASHAM		nd belief. ITTLE DRILLING OPERA	ATIONS MANAGER DATE 08–24–93 TELEPHONE NO. 915–688
TYPE OR PRINT NAME C.P. BASHAM			
	IGNED BY JERRY SEXTON		AUG 2 6 1993
DISTI	RICT I SUPERVISOR .	TITLE -	DATE -

mle -

APPROVED BY ---CONDITIONS OF APPROVAL, IF ANY: