State of New Mexico

Form C-103 Revised 1-1-89

SUBSEQUENT REPORT OF:

Submit 3 copies to Appropriate District Office E y, Minerals and Natural Resources Department DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30 025 32371 DISTRICT II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Box Drawer DD, Artesia, NM 88210 STATE 🗸 DISTRICT III 6. State Oil / Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 B-9519 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI WEST DOLLARHIDE DRINKARD UNIT (FORM C-101) FOR SUCH PROPOSALS. OIL GAS 1. Type of Well: WELL WELL OTHER 8. Well No. 2. Name of Operator 142 **TEXACO EXPLORATION & PRODUCTION INC** 9. Pool Name or Wildcat 3. Address of Operator 205 E. Bender, HOBBS, NM 88240 DOLLARHIDE TUBB DRINKARD 4. Well Location Unit Letter J : 1400 Feet From The SOUTH Line and 2580 Feet From The EAST Section 29 Township 24-S Range__38-E ___NMPM 10. Elevation (Show whether DF, RKB, RT,GR, etc.) GR-3219', KB-3230'

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

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|---|---|------------------|---------------------------------|----------|---|--|
| PERFORM REMEDIAL WORK | | PLUG AND ABANDON | REMEDIAL WORK | <u>~</u> | ALTERING CASING | |
| TEMPORARILY ABANDON | | CHANGE PLANS | COMMENCE DRILLING OPERATION | 1 | PLUG AND ABANDONMENT | |
| PULL OR ALTER CASING | - | | CASING TEST AND CEMENT JOB | | | |
| OTHER: | | | OTHER: ACID | ZE & \$ | SCALE SQUEEZE | |

8/17/00: MIRU. TIH W/RDS, SNKR BARS, PUMP, GAS ANCHOR. NDWH. NUBOP. TAG BTM @ PBTD @ 6690'.

8/18/00: TIH W/SONIC HAMMER TOOL ON TBG. LEFT TOOL @ 6530'.

NOTICE OF INTENTION TO:

8/21/00: ACID WASH DRINKARD CSG PERFS 6578-6682 W/4000 GALS 15% NEFE HCL & 120 BBLS 2% KCL WTR. SCALE SQZ SAME PERFS W/165 GALS TH-756 MIXED IN 60 BBLS 2% KCL WTR. FLUSH W/185 BBLS 2% KCL WTR.

8/22/00: TIH W/PURGE VALVE, SN, TBG, TAC. TBG @ 6659, SN @ 6632, TAC @ 6499. NDBOP. NUWH. TIH W/GAS ANCHOR, PUMP, SNKR BARS, RDS. HUNG ON. LOAD & TEST TO 500#-OK. RIG DOWN. PUMPING @ 4:30 PM. 8/26/00: ON 24 HR OPT. PUMPED 35 BO, 34 BW, & 7 MCF.

FINAL REPORT

| I hereby certify that the information above softwe and complete to the best of my keep SIGNATURE | wledgerand belief. We TITLE Engineering Assistant | DATE 9 | 9/18/00 |
|--|--|---------------|-------------|
| TYPE OR PRINT NAME J. Denise Lea | ake | Telephone No. | 397-0405 |
| This space for State Use) | | <u></u> | |
| | GARRA, 230 1.0 2. | 1521 20 | 6 |
| APPROVED Bynditions of Approval if Any:TITL | E | DATE | |

^{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.