

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 32372

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil / Gas Lease No.

b-9311

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.)

7. Lease Name or Unit Agreement Name

WEST DOLLARHIDE DRINKARD UNIT

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

8. Well No.
144

3. Address of Operator
P.O. BOX 730, HOBBS, NM 88240

9. Pool Name or Wildcat
DOLLARHIDE TUBB DRINKARD

4. Well Location
Unit Letter J : 1400 Feet From The S Line and 1880 Feet From The E Line
Section 32 Township 24S Range 38E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

GR-3186', KB-3197'

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☒ Acid stimulate and scale squeeze

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.

11/09/94: MIRU.

11/11/94: Cleaned out from 6471' - 6540'. Spot 150 gallons Ammonium Bicarbonate.

11/12/94: Acidized perforations with 5000 gallons 15% NEFE with 1500# salt. Pmax=1678psi, Pmin=1270psi, ISIP=1000psi, AIR=3.5 BPM.

11/15/94 - 11/21/94: Returned to production and tested.

11/22/94: TOH with treating packer. Ran 2-7/8" tubing to 6206'.

11/23/94: Ran 1-1/2"x2"x26" pump and returned to production for testing.

11/24/94 - 11/29/94: Tested.

11/30/94: Final test: 24 hour, 111 BO, 650 BW, 50 MCF (pumping)

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

SIGNATURE Darrell J. Cariger TITLE Engineering Assistant

DATE 3/7/95

TYPE OR PRINT NAME Darrell J. Cariger

Telephone No. 397-0426

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE

DATE MAR 09 1995

CONDITIONS OF APPROVAL, IF ANY: