

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

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|--|--|
| WELL API NO. | 30-025-32771 |
| 5. Indicate Type of Lease | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil / Gas Lease No. | |
| 7. Lease Name or Unit Agreement Name | WEST DOLLARHIDE DRINKARD UNIT |
| 8. Well No. | 152 |
| 9. Pool Name or Wildcat | DOLLARHIDE TUBB DRINKARD |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) | 3173'-GR; |

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTION <input type="checkbox"/> |
| 2. Name of Operator | TEXACO EXPLORATION & PRODUCTION INC. |
| 3. Address of Operator | P.O. BOX 730, HOBBS, NM 88240 |
| 4. Well Location | Unit Letter <u>M</u> : <u>600</u> Feet From The <u>SOUTH</u> Line and <u>760</u> Feet From The <u>WEST</u> Line Section <u>29</u> Township <u>24-S</u> Range <u>38-E</u> NMPM <u>LEA</u> COUNTY |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) | 3173'-GR; |

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: Casing integrity test for new injector ☒

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.

A casing integrity pressure test to 500 psi for 30 minutes was conducted 6/7/95 on the subject well <passed>.

The original pressure chart is attached; a copy can be found on the reverse side of this form.

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

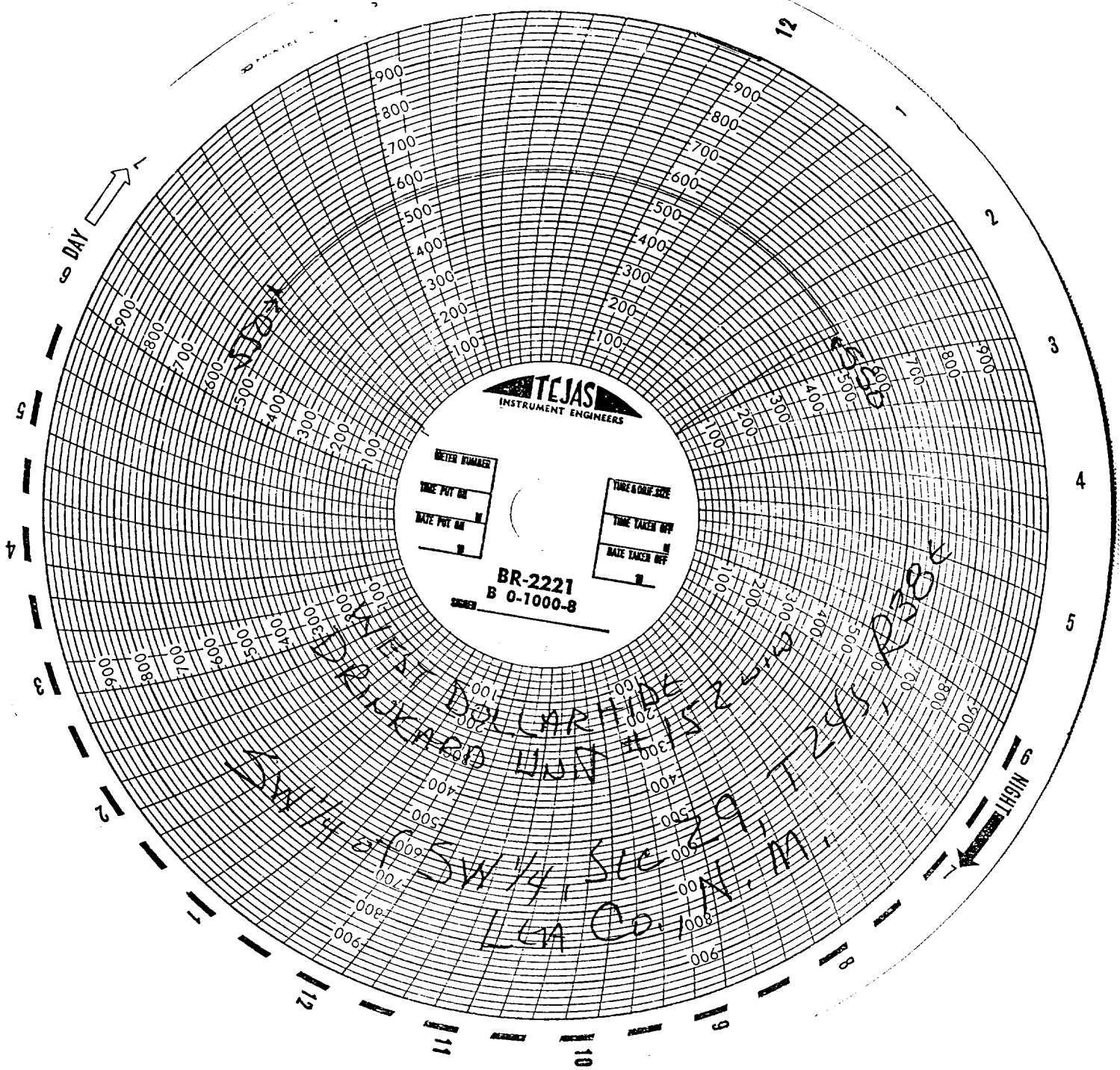
SIGNATURE  TITLE Engineering Assistant DATE 6/12/95

TYPE OR PRINT NAME Barrell V. Carriger Telephone No. 397-0426

ORIGINAL SIGNED BY

GARY WINK
APPROVED BY FIELD REP. II TITLE DATE JUN 14 1995

CONDITIONS OF APPROVAL, IF ANY:



RECEIVED

JUN 10 1996

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