Admin A Charles	State of New Mexico		Form C-103
Submit 3 Copies to Appropriate District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-025-31485	
DISTRICT II P.O. Drawer DD, Artosia, NM 88210 Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lesse	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE X FEE
			B-9613
SUNDRY NOTICES AND FIEPORTS 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.)  1. Type of Well:			7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT
OF AND CONTRACT OF AND CONTRAC	LL OTHER		
2. Name of Operator TEXACO EXPLORATION AND PRODUCTION INC.			8. Well No. 117
3. Address of Operator			9. Pool name or Wildox
P. O. Box 3109	Midland, Texas 79702		DOLLARHIDE TUBB DRINKARD
4. Well Location  Unit Letter D: 1098 Feet From The NORTH Line and 1270 Feet From The WEST Line  Section 5 Township 25—SOUTH Range 38—EAST NMPM LEA County			
Section 5	Township 25—SOUTH	Range 38-EAST whether DF, RKB, RT, GR, etc.)	NMPM LEA COURT
<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	GR-3128'		<i>\(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
<i>«</i>		insta Natura of Nation E	Jamest on Other Date
	heck Appropriate Box to Indi FINTENTION TO:		SSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND C		EMENT JOB 🔲	
OTHER: EXTEND PERMIT EX	(PIRATION DATE	X OTHER:	
12. Describe Proposed or Complete work) SEE RULE 1103.	d Operations (Clearly state all pertinent d	etails, and give pertinent dates, incl	uding estimated date of starting any proposed
DUE TO DELAYS IN OBTAI 1992 EXPIRATION DATE.	NING CO-OWNER APPROVALS, PLEASE EXTEND THIS DRILLIN	THIS WELL CANNOT BE S IG PERMIT AN ADDITIONAL	SPUDDED 3EFORE THE JANUARY 10, SIX (6) MONTHS.
I hereby cartify that the information ab	ove is true and complete to the best of my know	todge and belief.	

P. Bashum (crit DATE 12-15-92 TELEPHONE NO. 915-6884620 TYPE CR. PRINT NAME C. P. BASHAM (This space for State Use)
ORIGINAL SIGNED DY JERRY SEXTON DEC 1 8 '92 THE FIRMSOR

CONDITIONS OF APPROVAL, IF ANY:

Eupone 7-10 43.