

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-31486
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEB <input type="checkbox"/>
6. State Oil & Gas Lease No. B-9613
7. Lease Name or Unit Agreement Name WEST DOLLARHIDE DRINKARD UNIT
8. Well No. 119
9. Pool name or Wildcat DOLLARHIDE TUBB DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3163'

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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator TEXACO EXPLORATION AND PRODUCTION INC.	
3. Address of Operator P. O. Box 3109 Midland, Texas 79702	
4. Well Location Unit Letter <u>B</u> : <u>1007</u> Feet From The <u>NORTH</u> Line and <u>1392</u> Feet From The <u>EAST</u> Line Section <u>5</u> Township <u>25-SOUTH</u> Range <u>38-EAST</u> NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR-3163'	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: EXTEND PERMIT EXPIRATION DATE <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

DUE TO DELAYS IN OBTAINING CO-OWNER APPROVALS, THIS WELL CANNOT BE SPUDDED BEFORE THE JANUARY 10, 1993 EXPIRATION DATE. PLEASE EXTEND THIS DRILLING PERMIT AN ADDITIONAL SIX (6) MONTHS.

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

SIGNATURE C. P. Basham / cwH TITLE DRILLING OPERATIONS MANAGER DATE 12-15-92
TYPE OR PRINT NAME C. P. BASHAM TELEPHONE NO. 915-6884620

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE _____ DATE DEC 18 '92

CONDITIONS OF APPROVAL, IF ANY:

Expires 7-10-93