State of New Mexico le and Natural Resources Departm

Form C-103

Submit 3 copies to Appropriate District Office	Energy, Mineral
DISTRICTT	OIL CONS
P.O. Box 1980, Hobbs, NM 88240	012 00110
DISTRICT II	Santa Fe
P.O. Box Drawer DD, Artesia, NM 88210	Odilla i C
DISTRICT III	
1000 Rio Brazos Rd., Aztec, NM 87410	
SUNDRY NO (DO NOT USE THIS FORM FOR PRO	TICES AND REPO
1 (DO NOT OBE THIS FORM FOR THE	A COVER IS DIVIER

District Office	Limy, milotae ela itale	iai masai asa sapai anam	Revised 1-1-89
DISTRICT	OIL CONSERVA	TION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 88240	P.O. Box		30-025-33832
DISTRICT II		exico 87504-2088	5. Indicate Type of Lease
P.O. Box Drawer DD, Artesia, NM 88210	Odina 1 0, 11011 111	DA	STATE FEE
DISTRICT III			6. State Oil / Gas Lease No.
1000 Rio Brazos Rd., Aztec, NM 87410	TICES AND REPORTS ON	WELL	
(DO NOT USE THIS FORM FOR PRO			7. Lease Name or Unit Agreement Name
` DIFFERENT RESE	RVOIR. USE "APPLICATION F	OR PERMIT	WEST DOLLARHIDE DRINKARD UNIT
011	C-101) FOR SUCH PROPOSAL	S.)	
1. Type of Well: OIL GAS WELL WELL	L OTHER		
2. Name of Operator			8. Well No. 169
TEXACO EX	PLORATION & PRODUCTION I	NC.	169
3. Address of Operator P.O. Box 310	9, Midland Texas 79702		9. Pool Name or Wildcat
4. Well Location			
Unit Letter O:	714.5 Feet From The	SOUTH Line and 2558.	Feet From The <u>EAST</u> Line
Section 32	Township 24-S	Range 38-E NI	MPMLEA_ COUNTY
	10. Elevation (Show whether DF,	RKB, RT,GR, etc.) 3161'	
11. Check A	opropriate Box to Indicate	Nature of Notice, Repor	rt, or Other Data
NOTICE OF INTENTIC	N TO:	SI	UBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OP	ERATION PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEME	NT JOB 🗍
OTHER: EXTEND DR	LLING PERMIT	OTHER:	

DUE TO DRILLING PRIORITY, THIS WELL WILL NOT BE SPUDDED BEFORE THE FEBRUARY 13, 1998 EXPIRATION DATE. PLEASE EXTEND THIS DRILLING PERMIT FOR AN ADDITIONAL YEAR.

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I hereby certify that the information of the second of the	tyn pinforfo que and comfigure the book of my income	title Commission Coord	inator DATE 3/10/98	
TYPE OR PRINT NAM	A. Phi! Ry	IAN	Telephone No. 688-4606	
(This appear for State Use) ORIGINAL SIGNED BY CHPIS WILLIAMS APPROVED BY ORIGINAL SIGNED BY CHPIS WILLIAMS			DATE 1383	
CONDITIONS OF APP			DeScription to the user 2.0	

^{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.