

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
LC-061936 A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
Cotton Draw Unit

8. Well Name and No.
Cotton Draw Unit # 19

9. API Well No.
30 - 025 - 08125

10. Field and Pool, or Exploratory Area
Paduca Delaware

11. County or Parish, State

Lea

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other TA (Oil)

2. Name of Operator

Texaco Exploration and Production Inc.

3. Address and Telephone No.

P.O. Box 730, Hobbs, NM 88240

505-393-7191

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FSL & 1980' FWL Unit Letter N
S10-T25S-R32E

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

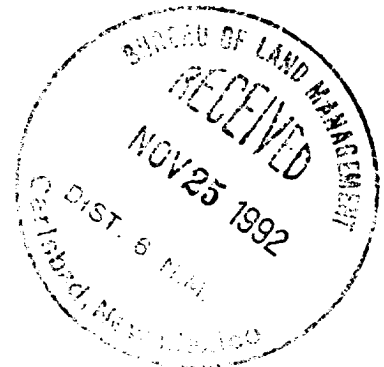
TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☒ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

1. RU. Install BOP.
2. TIH w/ bit and drillout 40' cmt cap and CIBP @ 4650'.
3. CO to 4770' TD.
4. Acidize Paduca Delaware Perfs 4704' - 4751'
5. TIH w/ cement lined injection string and inj. packer.
6. Set packer @ 4650'.
7. Place on Injection (After C-108 application has been approved).



14. I hereby certify that the foregoing is true and correct

Signed John Johnson Title Engr Asst Date 11-24-92

(This space for Federal or State office use)

Approved by David A. Glass Title _____ Date 12/30/92
Conditions of approval, if any: