

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990
Classification and Serial No.
LC-029420-B

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

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U. S. D. I.
BUREAU OF LAND MANAGEMENT

1. Type of Well
☐ Oil Well ☐ Gas Well ☒ Other Injection Well

2. Name of Operator
Texaco Exploration & Production Inc. ✓

3. Address and Telephone No.
P.O. Box 730, Hobbs, NM 88241-0730 (505) 393-7191

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FSL & 660' FWL, Unit Letter L
Sec. 23, T17S, R31E

6. If Indian, Allottee or Tribe Name

7. If Unit or CA. Agreement Designation

Skelly Unit

8. Well Name and No.
Skelly Unit #100

9. API Well No.
30-015-05432

10. Field and Pool, or Exploratory Area
Grayburg Jackson

11. Country or Parish, State
Eddy, New Mexico

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

| TYPE OF SUBMISSION | TYPE OF ACTION | |
|--|--|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input checked="" type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> Other | |

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

13. 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. Notified BLM. MIRU w/P&A equipment. Starting date 12-15-90.
2. TOH w/pkr, Set CIBP @ 3620', capped with 35' Class H cmt.
3. Loaded hole with salt gel mud consisting of 10 lb. brine with 25 lbs. of gel per barrel.
4. Spotted 100' (15 sxs) plug of Class H cmt (1.18 cuft/sx) from 1700' to 1600'.
5. Perforated 2 squeeze holes @ 760', established circulation to surface through squeeze holes.
6. Pumped 105 sxs Class H cmt down 8 5/8" csg and circulated to surface.
7. Cut off wellhead, install dry hole marker, cleaned location. Completion 12-17-90.

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

Signed [Signature] Title Engr. Asst. Date 9-19-91

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
(Signature of approval, if any)

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

FOR INFORMATION ONLY

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HOBBS OFFICE