

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division  
811 S. 1st Street  
Artesia, NM 88210-2834  
APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

dst

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  
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.  
3. Address and Telephone No. 205 E. Bender, HOBBS, NM 88240 397-0405  
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Unit Letter J : 2600 Feet From The SOUTH Line and 1500 Feet From The  
EAST Line Section 12 Township 25-S Range 31-E  
5. Lease Designation and Serial No. LC 061862  
6. If Indian, Alottee or Tribe Name  
7. If Unit or CA, Agreement Designation COTTON DRAW UNIT  
8. Well Name and Number COTTON DRAW UNIT  
9. API Well No. 86  
10. Field and Pool, Exploratory Area 30-015-29850  
11. County or Parish, State NW PADUCA DEVONIAN  
EDDY, NM

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  
Attaching Casing  
☒ OTHER: ACIDIZE DEVONIAN

Change of Plans  
New Construction  
Non-Routine Fracturing  
Water Shut-Off  
Conversion to Injection  
Dispose Water

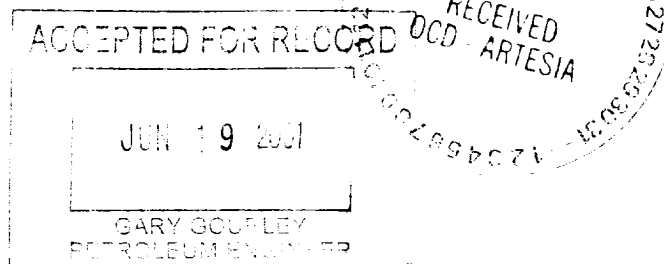
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

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.)

5-30-01: ACIDIZED WELL W/6500 GALS 28% HCL WITH 200 SCF/BBL N2. AIR=4.0 BPM. PAVG=250#, PMAX=1500#. FLUSH TO TOP PERF W/40 BBLS 2% KCL WTR SPACER. FLUSH SPACER TO 10,000' W/45,000 SCF N2. ISIP=746#. FLOW BACK N2 OVERNIGHT.  
5-31-01: RAN BACKPRESSURE TEST. RETURNED WELL TO PRODUCTION.  
6-07-01: ON 24 HR OPT. FLOWING 0 BO, 550 BW, & 1713 MCF.

DEVONIAN PERFS: 16440-16499.

FINAL REPORT



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

SIGNATURE *J. Denise Leake* TITLE Engineering Assistant  
TYPE OR PRINT NAME J. Denise Leake

DATE 6/15/01

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY: TITLE DATE

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.