Form 3160-5 (June 1990)

representations as to any matter within its jurisdiction.

BUREAU OF LAND MANAGEMENT

DEPARTMENT OF THE INTERIOR N.M. OIL CONS. DIVISION FORM APPROVED 811 S. 1st Street Budget Bureau No. 1004-0135

015/

DeSoto/Nichols 12-93 ver 1 0

811 5. 1ST STEEL Expires: March 31, 1993 SUNDRY NOTICES AND REPORTS ON WELLS ST., NM 88210-2834 SUNDRY NOTICES ST., NM 88210-2834 SUNDRY NOTICES ST., NM 88210-2834 SUNDRY NOTICES ST., NM 88210-283

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.	6. If Indian, Alottee or Tribe Name
Use "APPLICATION FOR PERMIT" for such proposals	
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
Type of Well: OIL GAS OTHER	Well Name and Number COTTON DRAW UNIT
Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	87
Address and Telephone No. 205 E. Bender, HOBBS, NM 88240 397-0405	9. API Well No. 30-015-30818
Location of Well (Footage, Sec., T., R., M., or Survey Description)	10. Field and Pool, Exploaratory Area
nit Letter A: 772 Feet From The NORTH Line and 154 Feet From The	PADUCA:WOLFCAMP, SOUTH (GAS)
AST Line Section 11 Township 25S Range 31E	11. County or Parish, State EDDY ,
Check Appropriate Box(s) To Indicate Nature of Notice, F	Report, or Other Data
TYPE OF SUBMISSION	TYPE OF ACTION
Abandonment Recompletion Notice of Intent Plugging Back ✓ Subsequent Report Casing Repair Attening Casing Final Abandonment Notice ✓ OTHER: ACIDIZE WOLFCA	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well
directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per OR INFORMATION PURPOSES: 2-06-00: ACIDIZED WELL W/5000 GALS 14% HCL & METHANOL MIXTURE (2500 GALS 28% H	Completion or Recompletion Report and Log Form.) g estimated date of starting any proposed work. If well is artinent to this work.)*.
directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per OR INFORMATION PURPOSES: 2-06-00: ACIDIZED WELL W/5000 GALS 14% HCL & METHANOL MIXTURE (2500 GALS 28% HOURS WITH WITH WITH WAY THROUGH FLUSH). 2-07-00: RETURNED WELL TO PRODUCTION. 2-14-00: ON 24 HR OPT. PUMPED 36 BO, 30 BW, & 3501 MCF.	Gompletion or Recompletion Report and Log Form.) g estimated date of starting any proposed work. If well is artinent to this work,)*.
2-06-00: ACIDIZED WELL W/5000 GALS 14% HCL & METHANOL MIXTURE (2500 GALS 28% HPERF W/76 BBLS 2% KCL WTR. SLIGHT LEAK @ SWEDGE IN WH 1/2 WAY THROUGH FLUSH. 2-07-00: RETURNED WELL TO PRODUCTION. (2-14-00: ON 24 HR OPT. PUMPED 36 BO, 30 BW, & 3501 MCF.	g estimated date of starting any proposed work. If well is entinent to this work.)*. CL & 2500 GALS METHANOL. FLUSH TO TOP
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directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per COR INFORMATION PURPOSES: 2-06-00: ACIDIZED WELL W/5000 GALS 14% HCL & METHANOL MIXTURE (2500 GALS 28% H PERF W/76 BBLS 2% KCL WTR. SLIGHT LEAK @ SWEDGE IN WH 1/2 WAY THROUGH FLUSH. 2-07-00: RETURNED WELL TO PRODUCTION. 2-14-00: ON 24 HR OPT. PUMPED 36 BO, 30 BW, & 3501 MCF. INAL REPORT 14. I hereby certify that the foresong is true and correct signature. SIGNATURE J. Denise Leake TYPE OR PRINT NAME J. Denise Leake	g estimated date of starting any proposed work. If well is ertinent to this work.)*. CL & 2500 GALS METHANOL. FLUSH TO TOP
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