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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator TEXACO Inc.		8. Farm or Lease Name J. W. Cooper	
3. Address of Operator P.O. Box 728 - Hobbs, New Mexico 88240		9. Well No. 3	
4. Location of Well UNIT LETTER <u>G</u> , <u>1900</u> FEET FROM THE <u>North</u> LINE AND <u>1900</u> FEET FROM THE <u>East</u> LINE, SECTION <u>5</u> TOWNSHIP <u>20-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat Lunice Monument Grayburg San Andres	
15. Elevation (Show whether DF, RT, GR, etc.) 3562' GR		12. County Lea	

16.

## Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Squeeze &amp; perforate</u> <input checked="" type="checkbox"/>

### SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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.

1. Set cement retainer at 3706'.
2. Squeeze through tubing below retainer w/50 sx Class 'c' low water loss cement followed w/50 sx Class 'C' neat cement.
3. Perforate w/1 JSPF from 3669-3675, 3677-3682, 3686-3703'.
4. Acidize with 3000 gals 15% MEA.
5. Test and return to production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Asst. District Supt. DATE 1-17-73

APPROVED BY Joe D. Ramey TITLE Dist. J. Supv. DATE JAN 18 1973  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 17 1977

OL. CONSERVATION COMM.  
HOLLA H. 100

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Form C-110  
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator TEXACO Inc. Lease J. W. Cooper

Well No. 3 Unit Letter G S5 T20S R37E Pool Bumble-Monument

County Lea Kind of Lease (State, Fed. or Patented) Patented

If well produces oil or condensate, give location of tanks: Unit B S5 T20S R37E

Authorized Transporter of Oil or Condensate Texas New Mexico Pipe Line

Address Box 1510, Midland, Texas  
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Warren Pet. Co.

Address Lovington, New Mexico Date Connected \_\_\_\_\_  
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well \_\_\_\_\_ ( )

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership \_\_\_\_\_ ( ) Other Name change X )  
(Give explanation below)

Remarks:

Change of Corporate name from The Texas Company  
to TEXACO Inc. effective May 1, 1959

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 30 day of April 1959

By [Signature]

Approved \_\_\_\_\_ 19\_\_\_\_

Title District Accountant

OIL CONSERVATION COMMISSION

Company The Texas Company

By [Signature]

Address Box 352, Midland, Texas

Title \_\_\_\_\_

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

## MISCELLANEOUS REPORTS ON WELLS

Submit this report in TRIPLICATE to the District Office, Oil Conservation Commission, within 10 days after the work specified is completed. It should be signed and filed as a report on Beginning Drilling Operations, Results of test of casing shut-off, result of plugging of well, result of well repair, and other important operations, even though the work was witnessed by an agent of the Commission. See additional instructions in the Rules and Regulations of the Commission.

## Indicate Nature of Report by Checking Below

REPORT ON BEGINNING DRILLING OPERATIONS		REPORT ON RESULT OF TEST OF CASING SHUT-OFF		REPORT ON REPAIRING WELL	
REPORT ON RESULT OF PLUGGING WELL		REPORT ON RECOMPLETION OPERATION		REPORT ON Plugged Back (Other) Perforate & Acidize	<b>X</b>

May 24, 1955 (Date) Midland, Texas (Place)

Following is a report on the work done and the results obtained under the heading noted above at the

The Texas Company (Company or Operator) J. W. Cooper (Lease)  
J. P. (Bum) Gibbins (Contractor), Well No. 3 in the SW 1/4 NE 1/4 of Sec. 5  
T. 20-S., R. 37-E., NMPM., Monument Pool, Lea County.

The Dates of this work were as follows: May 18, 1955 to May 21, 1955

Notice of intention to do the work (was) ~~(was not)~~ submitted on Form C-102 on May 9, 1955  
(Cross out incorrect words)  
and approval of the proposed plan (was) ~~(was not)~~ obtained.

## DETAILED ACCOUNT OF WORK DONE AND RESULTS OBTAINED

TD Was 3885' PBTD: 3742'

7 Casing set at 3760'

In order to increase productivity of this well, we have plugged back to 3742' by squeezing open hole from 3760' to 3796' and reversed out 60 sacks cement. Perforated 3712' to 3722' with 4 jet shots per foot and treated formation through perforation with 500 gallons mud acid. Job completed 11:30 A.M. May 20, 1955.

Witnessed by..... (Name) ..... (Company) ..... (Title)

Approved: OIL CONSERVATION COMMISSION

I hereby certify that the information given above is true and complete to the best of my knowledge.

Name.....

Position..... Asst. Dist. Supt.

Representing..... The Texas Company

Address..... Box 1270, Midland, Texas

(Title)

(Date)