

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions  
reverse side)

Budget Bureau No. 1004-1-107  
Expires August 31, 1985  
LEASE DESIGNATION AND SERIAL 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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection Well		7. UNIT AGREEMENT NAME Cooper Jal Unit	
2. NAME OF OPERATOR Texaco Producing Inc.		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, NM 88240		9. WELL NO. 109	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit Letter K, 1980 feet from the south line and 1980 feet from the west line		10. FIELD AND POOL, OR WILDCAT Langlie Mattix Seven	
14. PERMIT NO. 30-025-11133		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 18-24S-37E Lea NM	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3311 DF		12. COUNTY OR PARISH Lea	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Repair Casing Leak XX		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. 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. MIRU. Pull 2 3/8" cement lined tubing. Install BOP.
2. TIH with workstring, packer, and CIBP and locate casing leak, set CIBP at + 3250'.
3. Establish an injection rate out of the 5 1/2" casing using produced water, if possible POH.
4. TIH with 5 1/2" cement retainer and set the retainer above the casing leak.
5. Squeeze the casing leak with 300sx of class H cement.
6. Pull out of the retainer and reverse out excess cement.
7. POH and WOC.
8. TIH with workstring and 4 3/4" bit and drill out retainer and cement to the CIBP.
9. Test casing and resqueeze if necessary.
10. Drill out the CIBP and tag fill. POH
11. Test workstring and packer and TIH. set packer at 3200'.
12. Pressure up on annulus up to 700 psi.
13. Acidize open hole (3345'-3638') with 4000 gals 20% NEFE Acid with rock salt as a diverting agent.
14. TOH with workstring and packer.
15. TIH with injection tubing and place well on injection.
16. Run injection profile after injection rate has been established.

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

SIGNED W. B. Cule TITLE District Oper. Mgr. DATE 01/14/86

(This space for Federal or State office use)

APPROVED BY ATTORNEY GENERAL TITLE RECEIVED DATE 2-5-86

ALL facilities will be painted Sandstone Brown within 60 days from date of first production.

Subject to  
Like Approval  
by State

\*See Instructions on Reverse Side

HOBBS, NEW MEXICO