Form 3160-5 (June 1990)				N.M-OIL CONS. COMMISSION P.C. JOX 1980 HOBBS, NEW MEXICO 88240 Budget Bureau No. 1004-0135 Expires: March 31, 1993				
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.					5. Lease Designation and Serial No. NM 12612 6. If Indian, Alottee or Tribe Name			
Use "APPLICATION FOR PERMIT " for such proposals								
SUBMIT IN TRIPLICATE					7. If Unit or CA, Agreement Designation			
				8: Well Name	8: Well Name and Number COOPER JAL UNIT			
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.					117			
3. Address and Telephone No. P.O. BOX 730, HOBBS, NM 88240 397-0426					9. API Well No. 30 025 11140			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter N : 660 Feet From The SOUTH Line and 1980 Feet From The					10. Field and Pool, Exploratory Area JALMAT TANSILL YATES SEVEN RIVERS			
WEST Line	Section 18	Township <u>24S</u>	Range <u>. 37E</u>	11. County or	Parish, State LEA , NEW	MEXICO		
12.	Check Appropriate	Box(s) To Ind	icate Nature of Notice	e, Report, or C	ther Data			
TYPE OF SU	BMISSION			TYPE OF ACTI				
Notice of In Subsequen Final Abanc			Abandonment Recompletion Plugging Back Casing Repair Altering Casing OTHER: ACIDIZE AND C	LEANOUT	Change of Plans New Construction Non-Routine Frace Water Shut-Off Conversion to Inj Dispose Water (Note: Report results of multip)	n cturing ection		
directionally drilled,	l or Completed Operations (Clea , give subsurface locations and n DH with production eqipment.	neasured and true verti	etails, and give pertinent dates, inc ical depths for all markers and zon	cluding estimated date les pertinent to this wo	Completion or Recompletion R of starting any propose rrk,)*.			
			ren and act @ 2040' Landad b	aakaida				
3/16/95: Pickle usir Acid treated Jalmat	ng 300 gallons 15% acid and	150 gallons xylene. \$ 15% NEFE acid an	ker and set @ 2940'. Loaded b ad over flushed with 15 bbls. Pr		4 BPM			
4/24/95: Final test:	0 BO, 0 BW, 128 MCF (24 h	ours, pumping)			5 Å: 7 2 1			
			ACCEPTED FO Au JUN 2 0	STATES LE LA LE	ta References References			
	AMA	\sim	CARLSBAD, N	EW MEXICO				
14. I hereby certify that the for SIGNATURE	Lul I	J. Carriger	Engineering Assistan	nt	DATE	5/9/95		
(This space for Federal or Sta APPROVED BY CONDITIONS OF AP	PROVAL, IF ANY:	TITLE			DATE			
	001, makes it a crime for any person y matter within its jurisdiction.	knowingly and willfully to	make to any department or agency of th	he United States any false	e, fictitious or fraudulent st	atements or DeSoto/Nichols 10-94 ver 2.		

Soto/Nichols	10-94 ver 2.0	

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