

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

3. LEASE DESIGNATION AND SERIAL NO.

LC-032592 (b)

4. IF IMPROV. ELIGIBLE, SEE FORM 3160-6

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 ☐ GAS WELL ☐ OTHER ☒ Water Injection Well	7. UNIT AGREEMENT NAME Cooper Jal Unit
2. NAME OF OPERATOR Texaco Producing Inc.	8. FARM OR LEASE NAME Cooper Jal Unit
3. ADDRESS OF OPERATOR P.O. Box 728 Hobbs, NM 88240 (394-2585)	9. WELL NO. 239
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface Unit E, 1980' FNL 4660' FWL, Sec. 30, T24S, R37E	10. FIELD AND POOL, OR WILDCAT Jalmat
16. PERMIT NO.	11. SEC. T. R. N. OR BLK. AND SURVEY OR AREA Sec. 30, T24S, R37E
15. ELEVATIONS (Show whether SP, ST, CR, etc.) 3267' DF	12. COUNTY OR PARISH Lea
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PLUG OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Repair tubing leak + Cleanout

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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.)

9/9/87 - Pulled injection equipment. Tagged fill at 2906'.
9/10/87 - Cleaned out + side jetted openhole 2828' to 3180' TD.
9/11/87 - Reran injection equipment. Put on injection at 475 BWPD @ 700 psi -

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

SIGNED

R. Johnson

TITLE

AREA SUPERINTENDENT

DATE

SEP 28 1987

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

COPY