Form 3160-4 (Cotober 1990)

201

UNIT > STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0137
Expires: December 31, 1991

DeSato/Nichols 12-93 ver 1.0

SUBMIT ORIGINAL \	WITH 5 C	OPIES									5	. Lease C	esigna	tion and	Serial No	
WELL CON	1PLE	TION OR	REC	OMPLE	TIOI	N REF	POR	IA T	ND L	OG*	6	. If Indiar	n, Aloti	tee or Trit	e Name	
1a. Type of Well:	WE		т 🗆	DRY (OTHER						7	'. If Unit o	or CA,	Agreeme	nt Desigr	nation
1b. Type of Comple NEW ☐ WOR WELL OVE	k□ D		LUG 🗆 ACK	DIFF. D	ОТН	IER REC	OMP	LETIO	N			. Well Na		d Number -D-		
2. Name of Operat	or	TEXACO E	XPLOR	ATION & P	RODU	AI NOITC	IC.									
3. Address and Tel	ephone N	lo. 205 E. Bei	nder, HO	BBS, NM 8	38240				397-0	0405	9	. API We	ll No.			
4. Location of Well	(Report	ocation clearl	y and in a	accordance	with any	y State re	quiren	nents.*			1			30025	11748	
At Surface Unit Letter N :	990	Feel From T		UTH Linea				om The		Line		O. Field a USTIS-FU		II, Exploai IAN	atory Ar	ea
At proposed prod. zo	ne										i		T., R., 4 ,	M., or Bl Township		Survey or Area , Range 37E
At Total Depth					14. Pe	rmit No.		Date I	ssued		1	2. Count	y or Pa LEA	rish	13. 5	
15. Date Spudded	16. D	ate T.D. Reach	ned	17. Date Com	npl. (Rea	ady to Proc	1.)	18. EI	evations	s (Show v	wheth	ner DF,RT		etc.)		EW MEXICO lev. Casinhead
1/8/99	10.0	ato 1.5. readi			1/13/9	-	,	10.2		(0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		85 DF	, 0.1, 0			
20. Total Depth, MD	& TVD	21. Plug B	ack T.D., 6900'	MD & TVD	22. If I	Multiple Co	ompl.,	How Ma	iny*	23. In Drille			ary Too	ls	Cable	Tools
24. Producing Interva			Top, B	ottom, Name	(MD and	*(DVT b				•		·		25. Was I	Direction: N	al Survey Made
26. Type Electric and	Other Lo	gs Run											-	27. Was \	Well Core	
28.				CASIN	NG RE	CORD (Rep	ort all	Strina	s set ir	1 WE	ell)				
CASING SIZE & GR	ADE	WEIGHT L	B./FT.		EPTH S			ŀ	OLE S				ENT F	RECORD	Α.	MOUNT PULLED
										(1.4)	L. J :	: 1 .FR.11.	· · · · · · · · · · · · · · · · · · ·			
				_						**		. 4. 4 4	r- 	1		
	-		ODIC	SGD.)	GAF	N GOI	IRI	F٧							+	
			(Chin	, Juu- ,			W 1 5 C	`				. 11		1		
29.			LINE	RECORD)						30.			TUBING	RECOF	RD
SIZE		ТОР	В	оттом	SAC	CKS CEME	NT	:	CREEN	1		SIZE		DEPT	H SET	PACKER S
					-											
	1				·			32.	AC		2 7/ T		IRF C	6809'' FMFNT	SOUEF	ZF FTC
Off. Total attention to both (mitoritary or both)												RE, CEMENT, SQUEEZE, ETC. OUNT AND KIND MATERIAL USED				
6799,6803,6810,6821,6829-32 (14642"HLS) 2 JSPF 120 DEG PHAZING							6638-6832' 6000 G			 8000 GAL	GALS 15% NEFE HCL					
														•		.,
											-		···			
33.					Г	PRODUC	CTIO	N				<u>.</u>				
Date First Producti	on	Production N	lethod (F	lowing, gas					ump)					Well S	tatus (Pr	od. or Shut-in)
	/13/99	PUMPING 2												PROD	·	
Date of Test 1-24-99	Hours 24 HR	!	Choke S	Size	Prod'n Test Pe		Oil - 79	Bbl.		Gas - N 481	/ICF		Water 477	- Bbl.	1	s - Oil Ratio)88
Flow Tubing Press	Cas	ing Pressure	1 -	Calculated 24 Iour Rate	4- (Oil - Bbl.		Ga	s - MCF	F	M	/ater - Bb	l.	Oil G	ravity - i	API -(Corr.)
34. Disposition of SOLD	Gas (Solo	d, used for fue	el, ventec	, etc.)	1			!					Test \	Witnessed	і Ву	
35. List of Attachi NONE				0	,											
36. I hereby certify that If	ne tonegoing	s total nd correct	ōX.	Mari	- TITI	LE En	gine	ering	Assis	tant				DAT	E	2/16/99
TYPE OR PRINT N	AME	7010	ے Deni	se Leake	''''											2 10/33
THE OFFICIAL IN	TIVIC	J		J Lound												

Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

SUNDRY	NOTICES AND	REPORTS	ON WELLS
Do not use this form for p	proposals to drill or t	o deepen or re	entry to a differ

rent reservoir.

5. Lease Designation and Serial No. LC032650A

6. If Indian, Alottee or Tribe Name

7. If Unit or CA. Agr	
SUBMIT IN TRIPLICATE	eement Designation

1. Type of Well: OIL GAS OTHER	8. Well Name and Number COATES, A. BD-
2. Name of Operator TEXACO EXPLORATION & PRODUCTION INC.	3
B. Address and Telephone No. 205 E. Bender, HOBBS, NM 88240 397-0405	9. API Well No. 3002511748
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Letter N : 990 Feet From The SOUTH Line and 2310 Feet From The	10. Field and Pool, Exploaratory Area JUSTIS-FUSSELMAN
WEST Line Section 24 Township 25S Range 37E	11. County or Parish, State

VVESI	Line Section 24	Township _233	Nanye 3/E	_	LEA , NEW MEXICO
2.	Check Appropria	ate Box(s) To Indi	cate Nature of Notic	e, Report, or Oth	er Data
TYF	PE OF SUBMISSION			TYPE OF ACTION	
			Abandonment		Change of Plans
			Recompletion		New Construction
	Notice of Intent		Plugging Back		Non-Routine Fracturing
Ø	Subsequent Report		Casing Repair		Water Shut-Off
П	Final Abandonment Notice		Atlering Casing		Conversion to Injection
	This Abandonnest Notice		OTHER: RC TO UPPER F	SUSSELMAN	Dispose Water

1-08-99: MIRU, KILL WELL W/40 BBLS 2% KCL, TOH W/RDS, SNKR BARS, PMP, & GA. NDWH, NUBOP, TIH W/BIT ON CSG SCRAPER TO 2500'. 1-09-99: KILL WELL W/40 BBLS 2% KCL. RUN TOOLS TO 6870'. TOH W/SAME. TIH W/CIBP & SET @ 6850'. RU KILL TRUCK & ATTEMPT TO LOAD & TEST PLUG & CSG, PUMP 310 BBLS 2% KCL-ON VAC. RDWL. TIH W/7" 23# ON 210 JTS 2 7/8" TBG, PSA 6840', PUMP 60 BBLS 2% KCL DN TBG-ON VAC. PLUG NOT HOLDING. UNSET PKR & TAG PLUG @ 6850'. PULL PKR TO 6200'.

1-10-99: PSA 6007'. TBG ON VAC. CSG-40#. PRESS CSG TO 500#-ON VAC IN 30 SECS. SET PKR @ VARIOUS DEPTHS-LOADING BACKSIDE. CSG HELD FR 5712-SURF. FROM 5712-CIBP 6850' CSG WOULD NOT HOLD. CCL SHOWED BAD CSG FR 6818-50'.

1-11-99: UNSET PKR & TOH W/TBG & PKR.

1-12-99: TIH W/4" CSG GUN & PERF FUSSELMAN FORMATION FR 6638-6832', RDWL, TIH W/SONIC HAMMER ON 2 7/8" TBG TO 6500', HU STRIPPER HEAD

1-13-99: RU SONIC HAMMER TOOL & ACIDIZE FUSSELMAN PERFS 6638-6832 W/6000 GALS 15% NEFE HCL. 400# ON TBG - 0 ON CSG 4BPM. RU SWAB. FL @ 2800'. END FL @ 3000'. SWAB BACK WATER. GOOD BLOW OF GAS ON CSG.

1-14-99: KILL WELL W/50 BBLS 2% KCL. TOH W/TBG & SONIC HAMMER. TIH W/OPSMA, SN, TBG. KB-16', MA @ 6838', SN @ 6809', TAC @ 6611'. NDBOP & NUWH. TIH W/GAS ANCHOR, PUMP, SNKR BARS, RDS. LOAD & TEST TO 500#-OK. RDMO. PUMPING @ 5:30 PM 6.5X168" SPM. 1-24-99: ON 24 HR OPT. PUMPING 79 BO, 477 BW, & 481 MCF. GOR-6088.

FINAL REPORT

14. I hereby certify that the foregoing is true in corrections of the SIGNATURE	TITLE Engineering Assistant	DATE	2/16/99
TYPE OR PRINT NAME	J. Denise Leake		
(This space for Federal or State office use)			
APPROVED BY	TITLE	DATE	
CONDITIONS OF APPROVAL, IF ANY:			

^{13.} 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,)*.