CONTACT RECEIVING OFFICE FOR NUMBER OF COPIES REQUIRED **BLM Roswell District** Modified Form No. Form \$160-5 UNITE TATES NM060-3160-4 (July 1989) (Other instructions on rever DEPARTMENT G THE INTERIOR 5. LEASE DESIGNATION AND SERIAL NO. (Formerly 9-331) BUREAU OF LAND MANAGEMENT LC-032715 6. IF INDIAN, ALLOTTEE OR TRIBE NAME SUNDRY NOTICES AND REPORTS ON WELLS (the 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.) 7. UNIT AGREEMENT NAME CAS | SELL X COOPER JAL UNIT OTHER FARM OR LEASE NAME NAME OF OPERATOR TEXACO EXPLORATION AND PRODUCTION INC. SA AREA CODE & PHONE NO. 9. WELL NO. 1 ADDRESS OF OPERATOR 402 P. O. Box 3109, Midland, TX 79702 (915) 688–4620 10. FIELD AND POOL, OR WILDCAT LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) LANGLIE MATTIX SR-QN/JAL At surface 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2150' FSL & 50' FWL, UNIT LETTER L. SEC. 19, T-24-S, R-37-E 12. COUNTY OR PARISH 13. STATE 14. PERMIT NO. 18. ELEVATIONS (Show whether DF, RT, GR, etc.) NM GR-3294' KB-3304' API #30-025-32292 Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data 16. SUBSEQUENT REPORT OF: MOTICE OF INTENTION TO: REPAIRING WELL WATER SHUT-OFF TEST WATER SHUT-OFF **PULL OR ALTER CASING** X ALTERING CASING FRACTURE TREATMENT FRACTURE TREAT MULTIPLE COMPLETE X SHOOTING OR ACIDIZING ARANDONMENT⁴ ARANDON* SHOOT OR ACIDIZE (Other) COMPLETION CHANGE PLANS REPAIR WELL (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Caher) 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 partinent to this 1. PRO WIRELINE TAGGED PBTD @ 3693', TESTED CASING TO 3000# FOR 30 MINUTES 11-16-93. 2. HLS PERFED LANGLIE MATTIX w/ 2 JSPF: 3426-30, 3457-63, 3483-97, 3510-13, 3518-20, 3629-33, 3652-58. 78 HOLES. DOWELL FRACED w/ 29000 XLG 2% KCL & 136000# 16/30 SAND. 11-19-93. 3. TH WITH TUBING, PUMP AND RODS. PMUMPED 24 HOURS 11-30-93. RECOVERED 1 BO, 35 MCF, & 92 BLW. 4. TIH & SET RBP @ 3396'. TESTED TO 3000#. PERFED JALMAT w/ 2 JSPF: 3006-15, 3020-34, 3037-39, 3046-49, 3061-68, 3071-74, 3087-3102, 3110-12, 3117-21, 3132-41, 3149-51, 3155-58, 3168-70, 3173-75, 3178-80, 3210-17, 3223-28, 3277-95. 218 HOLES. DOWELL FRACED WITH 43000 GAL XLG 2% KCL & 220000# 12/20 SAND, 12-17-93. 5. TH AND SET 2 7/8 TUBING @ 3249. RAN RODS AND 2.5 x 1.75 x 24' PUMP. 6. PUMPED JALMAT 24 HOURS ON POTENTIAL TEST 12-31-93. RECOVERED: 47 BO, 13 MCF, 316 BLW, 277 GOR, 29 GRAVITY. 7. TOH WITH RBP. TIH WITH TUBING, PUMP AND RODS. SEATING NIPPLE @ 3597'.

8. PUMPED COMBINED ZONES 24 HOURS 02-06-94. RECOVERED: 50 BO, 49 MCF, 367 BW.

| 18. I hereby certify that the foregoing is true and correct SIGNED P. Bachem / Cw H | TITLE | DRILLING OPERATIONS MANAGER | DATE | 02-07-94 |
|--|-------|-----------------------------|------|----------|
| (This space for Federal or State office use) | | | | |
| APPROVED BY CONDITIONS OF APPROVAL. IF ANY: | TITLE | | DATE | |