

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
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.

Use "APPLICATION FOR PERMIT --" for such proposals

5. Lease Designation and Serial No.
LC 061873

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well: ☐ OIL WELL ☐ GAS WELL ☒ OTHER

8. Well Name and Number
COTTON DRAW UNIT

2. Name of Operator
TEXACO EXPLORATION & PRODUCTION INC.

88

3. Address and Telephone No. 205 E. Bender, HOBBS, NM 88240 397-0405

9. API Well No.
30-025-35086

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter K : 2210 Feet From The SOUTH Line and 1360 Feet From The

10. Field and Pool, Exploaratory Area
PADUCA SOUTH, WOLFCAMP

WEST Line Section 7 Township 25-S Range 32-E

11. County or Parish, State
LEA, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION

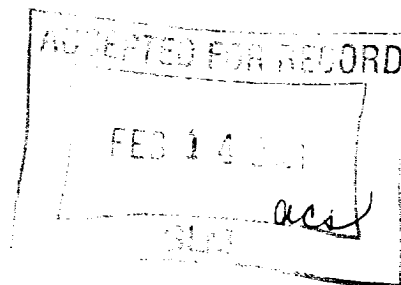
TYPE OF ACTION

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> OTHER: 9 5/8" CASING	<input type="checkbox"/> Dispose Water

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

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.)

7-27-00/8-17-00: DRILLING 4331-4350. RAN 9 5/8" CSG. TIH W/19 JTS (859') 40#, S95 & 78 JTS (3468') 40# K-55 LTC. TOTAL 4327' @ 4350'. CMT W/1130 SX 35/65 H @ 12.8 PPG, TAIL W/450 SX H @ 15.6 PPG. CIRC 28 SX TO SURF. NDBOP. SET SLIPS. HU FL TAG TOC @ 4298'. DRILL CMT & INSERT. DRILL 4350-4609, 4635, 576, 5576, 5607, 5169, 5669, 5917, 6365, 6420, 6546, 6746, 6922, 6950, 7112, 7495, 7609, 7860, 8325, 8359, 8822, 9024, 9115, 9351, 9633, 9727, 9745, 9755, 10258, 10285, 10319, 10696, 10758, 10789, 11246, 11258, 11350, 11664, 11821, 11854, 12070, 12133, 12178, 12259, 12414, 12462, 12466, 12476, 12817. TD 8 1/2" HLE @ 0115 8-16-00. RAN BOREHOLE COMPENSATED SONIC GAMMA RAY FR 12829-4350. WASH 40' TO BTM 10' SOFT FILL.



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

SIGNATURE J. Denise Leake TITLE Engineering Assistant

DATE 8/18/00

TYPE OR PRINT NAME J. Denise Leake

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY: TITLE

DATE

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.