

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

## OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30 - 025 - 09643

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

**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"  
(FORM C-101) FOR SUCH PROPOSALS.)

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

2. Name of Operator  
Texaco Exploration and Production Inc.

3. Address of Operator  
P. O. Box 730 Hobbs, NM 88240

4. Well Location  
Unit Letter K : 1650 Feet From The SOUTH Line and 1650 Feet From The WEST Line  
Section 24 Township 24S Range 36E NMPM LEA County

7. Lease Name or Unit Agreement Name

COOPER JAL UNIT

8. Well No.  
130

9. Pool name or Wildcat  
LANGLIE MATTIX 7RQG

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3308' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☒  
OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

04-16-93 / 05-19-93

- 1) PULLED INJECTION EQUIPMENT, C/O TO 3562' W/BIT, SET TREATING PACKER @3424'.
- 2) ACIDIZED OPEN HOLE 3470-3562' W/4K GAL 15% NEFE.
- 3) RAN INJECTION EQUIPMENT, SET PACKER @ 3440', LOADED W/INHIBITED WATER, TESTED CASING (LEAKED).
- 4) LOCATED CASING LEAK @ 300'-331'.
- 5) SQUEEZED W/27 SX MICRO-MATRIX CEMENT, FAILED PRESSURE TEST, PUMP 27 ADD'L 27 SX, HELD OK.
- 6) RAN INJECTION EQUIPMENT, SET PACKER @ 3440'.
- 7) TEST CASING, NMOCD REPRESENTATIVE MR. CHARLIE PERRIN WITNESSED.  
(CHART ATTACHED W/COPY ON REVERSE SIDE)
- 8) RESUME INJECTION IN LANGLIE MATTIX OPEN HOLE (3470-3562'): 230 BWPD @ 660#.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE L.W. Johnson TITLE ENGR ASST DATE 08-11-93

TYPE OR PRINT NAME L.W. JOHNSON TELEPHONE NO. 393-7191

(This space for State Use)

Orig. Signed by  
Paul Kautz  
Geologist

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

AUG 16 1993

