Submit 3 Copies To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 88240		ew Mexico d Natural Resources	WELL API NO.	Form C-103 Revised March 25, 1999	
District II 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION			30-025-09	9649	
District III 2040 South Poshoos			5. Indicate Type		
1000 Rio Brazos Rd., Aztec, NM 87410  District IV  Santa Fe, NM 87505			STATE [6. State Oil & C		
2040 South Pacheco, Santa Fe, NM 87505			o. State Off & C	ras Lease No.	
SUNDRY NOTICES  (DO NOT USE THIS FORM FOR PROPOSALS DIFFERENT RESERVOIR. USE "APPLICATI PROPOSALS.)  1. Type of Well:  Oil Well  Gas Well	7. Lease Name or Unit Agreement Name:  Cooper Jal Unit				
2. Name of Operator	Other		8. Well No.		
Texaco Exploration & Production, Inc.				230	
3. Address of Operator P.O. Box 3109, Midland, Tx 79702			9. Pool name or Wildcat		
4. Well Location			Jalmat, Tans	ill, Y, 7 Rvrs.	
Unit Letter F: 1650 feet from the North line and 2310 feet from the West line					
Section 25	Township 24S	Range 36E	NMPM Lea	County	
10	Elevation (Show whe	ther DR, RKB, RT, GR, e	tc.)		
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO:			SSEQUENT RE		
PERFORM REMEDIAL WORK   PL	.UG AND ABANDON [	REMEDIAL WOR	ĸ □	ALTERING CASING	
	HANGE PLANS	COMMENCE DR	ILLING OPNS.	PLUG AND	
	JLTIPLE COMPLETION	CASING TEST A CEMENT JOB	ND	ABANDONMENT (A.)	
OTHER:		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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.					
<ol> <li>MI &amp; RU Plugging Equipment. 3/7/01</li> <li>CIRC. Well w/ MLF. 3/7/01</li> <li>Spot 25 Sx Class C Cmt 2600' Tag Toc @ 2300'. 3/7/01</li> <li>Perf. w/6 shot Gun @ 1300', Squeezed 50 Sx Class C Cmt Tag Toc @ 1050. 3/8/01</li> <li>Perf. @ 400', @ 325' Couldn't Pump Into Perfs. CIRC Well 450-Surface w/50 Sx Class C Cmt. 3/8/01</li> <li>Install Dry Hole Marker. 3/8/01</li> </ol>					
I hereby certify that the information above SIGNATURE  Type or print name  Timmy Br	TTT	o the best of my knowled		_DATE_ <i>3//2/o/</i> _	
(This space for State use)		1-10			
APPPROVED BY Conditions of approval, if any:	TIT	LE flet Kep		DATE()-/4-0/	
G W W	•				