CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Submit 3 Copies to Appropriate District Office

Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240  DISTRICT II Santa Fe, New Mexico 87504-2088		WELL API NO.	
			30 - 025 - 25682
P.O. Drawer DD, Artesia, NM 88210  DISTRICT III		5. Indicate Type of Lease  STATE FEE X	
1000 Rio Brazos Rd., Aztec, NM 87410			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"			7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well:			COOPER JAL UNIT
OIL X OAS WELL OTHER			
2. Name of Operator Texaco Exploration and Production Inc.			8. Well No. 151
3. Address of Operator			9. Pool name or Wildcat
P. O. Box 730 Hobbs, 4. Well Location	NM 88240		LANGLIE MATTIX (7 RVRS/QUEEN) - GB
	71 Feet From The NORTH	Line and	170 Feet From The EAST Line
Section 24	Township 24S Ra	inge 36E 1	County NMPM LEA
	10. Elevation (Show whether		VIIII
11. Check	Appropriate Roy to Indicate I	Vature of Nation De	
tionic, i			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING		CASING TEST AND CE	
OTHER: CONVERT TO WATER IN	JECTION X	OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all persinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.			
1) AWAITING NMOCD RULING ON CERTIFICATION FOR ENHANCED RECOVERY PROJECT AND PENDING APPROVAL OF NMOCD C-108 FORM (APPLICATION TO DHC INJECT).  2) RIG UP, INSTALL BOP.  3) PULL PRODUCTION EQUIPMENT.  4) CLEANOUT TO 3650' W/ 4-3/4" BIT.  5) SELECTIVELY PERF ADDITIONAL LANGLIE MATTIX 3350'-3650'.  6) ACIDIZE LANGLIE MATTIX (3350'-3650') W/ 4000 GALS 15% NEFE HCI.  7) SET INJ. PKR. ON 2-3/8" CMT. LINED TBG. @ 2980'. LOAD BACK-SIDE W/ INHIBITED PRK FLUID. TEST ANNULUS.  8) PLACE WELL ON INJECTION.			
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIONATURE MULGISTE	<del></del>	PRODUCTION EN	GINEER DATE07-29-93
TYPE OR PRINT NAME MICHAEL C.	ALEXANDER		теленноме но.393-7191
	rig. Signed by Paul Kautz		
APPROVED BY	Geologist		4110 8.0 4000
COLDITIONS OF ATTROUTE TO A TO	mu mu		DATE _AUG_0.3_1993