

**EXXON** COMPANY, U.S.A.  
POST OFFICE BOX 4358 • HOUSTON, TEXAS 77210-4358

HOUSTON PRODUCTION ORGANIZATION  
REGULATORY COMPLIANCE



DEC - 8 1998

EXXON.COM

December 04, 1998

Ms. Dianne Lyons  
Colorado Oil and Gas Conservation Commission  
1120 Lincoln St., Suite 801  
Denver, CO 80203

Dear Ms. Lyons:

Per our discussion on December 04, 1998, attached are the Sundry Notices and Completion Report for the plugging and abandonment of the Cocklebur Draw Unit Well No. 2 which was originally submitted on January 12, 1987.

Should you have questions, please call me at (713) 431-1013.

Sincerely,

Daniel V. Dueñas  
Regulatory Specialist

DVD  
Attachment

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

12/8/98  
cc per David Dullian  
Dianne Lyons

A DIVISION OF EXXON CORPORATION



RECYCLED

File: Well File - Cocklebur Draw Unit #2 (2)

**EXXON** COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

PRODUCTION DEPARTMENT  
SOUTHWESTERN DIVISION

January 12, 1987

Colorado Oil and Gas  
Conservation Commission  
Suite 300, Logan Tower Bldg.  
Denver, CO 80203

Bureau of Land Management  
Oil and Gas Operations  
701 Camino del Rio  
Durango, CO 81301

Please hold the attached Sundry Notice, Completion Report, Logs, and DST  
Reports confidential for the maximum period of time.

DAM:cac

Attachment(s)

*David A. Murray* 1/12/87  
David A. Murray  
Permits Supervisor

DEC - 8 1998

CONS. COMM.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

JUL 26 1991

SUNDRY NOTICES AND REPORTS ON WELLS Bureau of Land Management  
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.

BPT24357

6. If Indian, Allottee or Tribe Name

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7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE DEC -8 1998

1. Type of Well

☐ Oil☐ Well☐ Gas☒ Other

BOND RELEASE

2. Name of Operator

EXXON CORPORATION ATTN: REGULATORY AFFAIRS

3. Address and Telephone No.

P. O. BOX 1600 MIDLAND, TX 79702 (915) 688-7550

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

2286' FNL &amp; 656' FWL SEC. 10 (SWNW), T43N, R15W

COCKLEBUR DRAM

8. Well Name and No.

COCKLEBUR DRAM UNIT

2

9. API Well No.

0511306057

10. Field and Pool, or Exploratory Area

WILDCAT

11. County or Parish, State

SAN MIGUEL CO

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent☐ Subsequent Report☒ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment☐ Recompletion☐ Plugging Back☐ Casing Repair☐ Altering Casing☒ Other☐ Change of Plans☐ New Construction☐ Non-Routine Fracturing☐ Water Shut-Off☐ Conversion to Injection

BOND RELEASE

(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.)

## BOND RELEASE

THE SUBJECT LOCATION HAS BEEN RECLAIMED AND IS READY FOR INSPECTION AND BOND RELEASE. PLEASE RELEASE EXXON FROM ANY FURTHER LIABILITY FOR THIS LOCATION AND REMOVE IT FROM THE BOND LISTING.

SEPT 05 91

DEPA PENDING

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

Signed Barbara B. Cornell Barbara B. Cornell  
Title Sr. Office Assistant Date 07/23/91

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

John J. Jorda Acting Area Manager Date 8/30/91

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.

\*See Instructions on Reverse Side  
OPERATOR'S COPY

## GENERAL INSTRUCTIONS

This form is for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law

and regulations. Any special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

## SPECIFIC INSTRUCTIONS

DEC - 8 1998

Item 4-If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local or Federal office for specific instructions.

data on any former or present productive zones, or other zones with present significant fluid contents not sealed-off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

Item 13-Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment;

## NOTICE

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et. seq., 35 U. seq. 25 U.S.C. et. seq.; 43 CFR 3160.

PRINCIPAL PURPOSE - The information is to be used to evaluate, when appropriate, approve applications, and report completion of secondary well operations, on a Federal or Indian lease.

### ROUTINE USES:

- (1) Evaluate the equipment and procedures used during the proposed or completed subsequent well operations.
- (2) Request and grant approval to perform those actions covered by 43 CFR 3162.3-2(2).
- (3) Analyze future applications to drill or modify operations in light of data obtained and methods used

- (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions

EFFECT OF NOT PROVIDING INFORMATION Filing of this notice and report and disclosure of the information is mandatory once an oil or gas well is drilled.

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501, et. seq.) requires us to inform you that:

This information is being collected in order to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

This information will be used to report subsequent operations once work is completed and when requested, to obtain approval for subsequent operations not previously authorized.

Response to this request is mandatory for the specific types of activities specified in 43 CFR Part 3160.

Public reporting burden for this form is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management, (Alternate) Bureau Clearance Officer, (WO-77), 18 and C Streets, N.W., Washington, D.C. 2024, and the Office of Management and Budget, Paperwork Reduction Project (1004-0135), Washington, D.C. 20503.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Form approved  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

DATE OF RECEIPT  
JAN 16 1987

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a shallower formation. Use "APPLICATION FOR PERMIT" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRY	2. NAME OF OPERATOR Exxon Corp.		3. ADDRESS OF OPERATOR Attn: David A. Murray	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface P. O. Box 1600, Midland, TX 79702 2286' FNL and 656' FWL of Sec. 10 (SWNW) DEC -- 8 1998				
14. PERMIT NO. 05-1113-06057		15. ELEVATIONS (Show whether 27, 47, or 66 ft. or less.) GR - 6910		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		17. SUBSEQUENT REPORT OF:		
1. WATER SHUT-OFF		2. WATER SHUT-OFF		3. REPAIRING WELL
4. FRACTURE TREAT		5. FRACTURE TREATMENT		6. ALTERING CASING
7. SHOOT OR ACIDIZE		8. SHOOTING OR ACIDIZING		9. ABANDONMENT*
8. REPAIR WELL		(Other)		
(Other)		(Note: Report results of multiple completion or well completion or Recaptivation Report and Log form)		
10. FIELD AND POOL, OR VICINITY 2		11. SEC. T. R. M. OR BLK. AND SUBST. OR AREA Wildcat		
12. COUNTY OR PARISH Sec. 10, T43N, R15W		13. STATE San Miguel CO		

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
(Other)	<input type="checkbox"/>

WELL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>

WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>
(Other)	<input type="checkbox"/>

REPAIRING WELL	<input type="checkbox"/>
ALTERING CASING	<input checked="" type="checkbox"/>
ABANDONMENT*	<input type="checkbox"/>

(Note: Report results of multiple completion or well completion or Recaptivation Report and Log form)

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 show pertinent to this work.)

B.L.M. representative, Terry Galloway, verbally approved procedure to plug and abandon subject well as follows:

- (1) Set CIBP at 6490' and spot 5 sx. CL.H cement on top of plug. Test 500 psi. OK.
- (2) Spot 50 sx. CL.H cement from 3127' - 2800'. Tagged plug @ 2800'.
- (3) Circulated cement from 120' to surface.
- (4) Cut casing off 4' below ground level. Welded steel cap on top of casing. Installed dry hole marker with well identification.
- (5) Cleaned location.

Sundry Notice for reclamation will be submitted when location is ready for inspection.

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

SIGNED <u>David A. Murray</u>	TITLE <u>Permits Supervisor</u>	DATE <u>1/12/87</u>
(This space for Federal or State office use)		
APPROVED BY <u>David A. Murray</u>	TITLE <u>Permits Supervisor</u>	DATE <u>1 6 1987</u>
CONDITIONS OF APPROVAL, IF ANY:		

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1. TYPE OF WELL: ☐ OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER

2. TYPE OF COMPLETION: ☒ NEW WELL ☐ WORK OVER ☐ REPER. ☐ BACK ☐ DIFF. ☐ REPAIR ☐ OTHER

3. NAME OF OPERATOR: Exxon Corp. Attn: David A. Murray

4. ADDRESS OF OPERATOR: P. O. Box 1600, Midland, TX 79702

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements):  
At surface 2286' FNL and 656' FWL of Sec. 10 (SWNW)  
At top prod. interval reported below  
At total depth

6. DATE SPUDDED: 6-7-86 7-18-86 P&A 12-17-86 14. PERMIT NO. 05-113-06057 15. DATE ISSUED 5-6-86

7. TOTAL DEPTH, MD & TVD: 9801 21. PLUG BACK T.D., MD & TVD: Surface 22. IF MULTIPLE COMPL., HOW MANY? 23. INTERVALS DRILLED BY: ROTARY TOOLS CABLE TOOLS

8. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD):  
NONE

9. TYPE ELECTRIC AND OTHER LOGS RUN: NONE

10. DIL/SR/Sonic/GR/CAL FDC/CNL/GR GR/RFT NO

11. CASING RECORD (Report all strings set in well):  
Casing Size: 16 Line Pipe 80 20 20  
Casing Weight: 40 3059 12 1/4 1125 sx CL.D  
Casing Length: 17, 20 9797 8 1/2 1995 CL.H Lite; 325 sx H

12. PERFORATION RECORD (Interval, size and number):  
NONE

13. LINER RECORD:  
Size: NONE  
Top (MD): 800  
Bottom (MD): 9797  
Sacks Cement: 1125 sx CL.D  
Screen (MD): 8 1/2

14. PERFORATION RECORD (Interval, size and number):  
NONE

15. DATE FIRST PRODUCTION: JAN 20 1987

16. PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump):  
NONE

17. DATE OF TEST: 1/20/87

18. HOURS TESTED: 24

19. CROCK SIZE: 24

20. PROD. FOR TEST PERIOD: 24

21. CALCULATED 24-HOUR RATE: 24

22. CASING PRESSURE: 24

23. OIL—BBL. GAS—MCF. WATER—BBL. GAS—OIL RATIO

24. DISPOSITION OF GAS (Gals. used for fuel, vented, etc.):  
NONE

25. LIST OF ATTACHMENTS: NONE

26. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

27. SIGNATURE: David A. Murray

28. TITLE: Permits Supervisor

29. DATE: 1/12/87

30. OPERATOR'S COPY

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
-----------	-----	--------	-----------------------------

NAME	MEAS. DEPTH	TRUE VERT. DEPTH
	TOP	

D. S. T.	Cutler	5837	7192	5845	7372	No test. Packer failure	See report.	Dakota	650	
	Cutler							Morrison	900	
								Navajo	1,750	
								Wingate	2,570	
								Cutler	2,902	
								Hermosa	8,357	
								Paradox	9,085	
								Ismay	9,223	
								Gothic Shale	9,634	
								Desert Creek	9,722	
								Paradox Salt	9,793	

38. GEOLOGIC MARKERS

NAME		MEAS. DEPTH	TRUE VERT. DEPTH
Dakota		650	
Morrison		900	
Navajo		1,750	
Wingate		2,570	
Cutler		2,902	
Hermosa		8,357	
Paradox		9,085	
Ismay		9,223	
Gothic Shale		9,634	
Desert Creek		9,722	
Paradox Salt		9,793	

DEC - 8 1998

U.S. GEOLOGICAL SURVEY

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To Jim M. Kee  
Date 11-19-86 Time 8:00

WHILE YOU WERE OUT

Name Bob Anderson  
of Exxon  
Phone 915-685-4256

Telephoned		Please Call	<input checked="" type="checkbox"/>
Returned Your Call		Will Call Again	
Wants To See You		RUSH	

Message 11-20-86 - Dave  
10 - day phone ok w/  
possible extension if needed  
& call in again.

Jim  
OPERATOR

395-51-06-0013

Printed By Division of Central Services

~~Case #11-20-86~~

Exxon

Cocklebour Draw That 2

SWNW 10 43N 15W

San Miguel -

Form 4 (EXM for 5)

Wants conf. I will

Send confirmation soon

HA