

Submit 3 Copies to Appropriate District Office

State of New Mexico  
Geology, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

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

DISTRICT II  
P.O. Drawer 00, Aramis, NM 88210

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

WELL API NO.

1. Indicate Type of Lease  
STATE  FEZ

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.)

7. Lease Name or Unit Agreement Name

1. Type of Well:  
OIL WELL  GAS WELL  OTHER

STATE TD

2. Name of Operator  
Chevron U.S.A. Inc

8. Well No.  
3

3. Address of Operator  
P.O. Box 1150 Midland

9. Pool name or Wildcat  
TOWNSEND Permian upper

4. Well Location  
Unit Lease X : 990 Feet From The South Line and 990 Feet From The East

Section 2 Township 16S Range 35E NMPM LEA

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3992 DF

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

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

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.

Set 5 1/2 CIOP @ ± 10,200 cap w/ 35' cmt.  
 Spot P+A mud  
 Set cmt plug @ 8060' top of Abo 100' isolation plug 25 sx cmt. plug.  
 Set cmt plug @ 6006' top of Glorieta 100' isolation plug 25 sx cmt plug.  
 PERF sqz holes @ ± 4723' sqz 8 5/8 x 5 1/2 casing shoe.  
 Spot P+A mud to ± 450'.  
 PERF + sqz @ 408 ± sqz 13 3/8 x 8 5/8 casing shoe bring cmt to surf  
 inside 5 1/2 CSQ.  
 Cut off wellhead + install P+A marker CLEAN location.

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

SIGNATURE Ed Doherty TITLE T.A. Delg. DATE 9/20/90

TYPE OR PRINT NAME E. O. Doherty TELEPHONE NO. 915-687-7812

(This space for State Use) ORIGINAL SIGNED BY JERRY BENSON SUPERVISOR

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

CONDITIONS OF APPROVAL, IF ANY: THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED