

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-20008
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-155-1
7. Lease Name or Unit Agreement Name: New Mexico O NCT-1
8. Well No. 14
9. Pool name or Wildcat Vacuum Wolfcamp - ABO

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

2. Name of Operator
 Chevron - Texaco, Corp.

3. Address of Operator
 P. O. Box 3109, Midland, TX 79702

4. Well Location
 Unit Letter J : 1874 feet from the South line and 2086 feet from the East line
 Section 36 Township 17S Range 34E NMPM Lea County

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

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

- Set 2 7/8" CIBP @ 9900' fill 2 7/8" Csg w/125 Sx plug 9900'-4900' (Wolfcamp) Tag 4927'
- R/U ABO unable to set 2 7/8" CIBP bad spot on Csg RIH spot 110 Sx plug 9300'-4900' (Wolfcamp) Tag @ 4863'
- R/U Blinebry set 3 1/2" CIBP @ 9975' fill 3 1/2" Csg w/185 Sx 9975'-4900' (Wolfcamp ABO) Tag 4936'
- Cut Csg @ 4900' unable to pull Sqz w/90 Sx 4900'-4700' (9 5/8" shoe) Tag @ 4636'
- Fill 3 1/2" Csg blinebry w/70 Sx 4936'-3600' fill ABO 2 7/8" Csg w/35 Sx 4863'-3600'
- Cut 2 7/8" Csg @ 3600' unable to pull Sqz w/90 Sx 3600'-3400' (Queen) Tag 3336'

cont'd..... (see page 2)

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

SIGNATURE [Signature] TITLE MANAGER DATE 11/7/01

Type or print name JIMMY DAGLEY Telephone No. 915 683 4796
 (This space for State use)

APPROVED BY [Signature] TITLE [Signature] DATE 1-29-02
 Conditions of approval, if any:

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2. Name of Operator Chevron-Texaco, Corp.		6. State Oil & Gas Lease No. B-155-1
3. Address of Operator P. O. Box 3109, Midland, TX 79702		7. Lease Name or Unit Agreement Name: New Mexico O NCT-1
4. Well Location Unit Letter <u>J</u> : 1874 feet from the <u>South</u> line and <u>2086</u> feet from the <u>East</u> line Section <u>36</u> Township <u>17S</u> Range <u>34E</u> NMPM <u>Lea</u> County		8. Well No. 14
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. Pool name or Wildcat Vacuum Wolfcamp - ABO

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7. Cut 3 string L/D same spot 90 Sx plug 2900'-2700- (Stub-Yates-B-Salt) Tag @ 2651'

8. Perf 9 5/8" Csg @ 1620' w/6 hole unable to sqz spot 125 Sx 1620'-1300' (13 3/8" shoe T-Salt) Tag @ 1228'

9. Circ cmt 30' to surf w/15 Sx. Install dry hole marker. 11/07/01

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

SIGNATURE *J. Bagley* TITLE MANAGER DATE 11/7/01

Type or print name Jimmy BAGLEY Telephone No. 915 683-4996

(This space for State use)

APPROVED BY *E. Gonzalez* TITLE Asst. Sec. DATE 1-29-02

Conditions of approval, if any:

GWW

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