

OIL CONSERVATION DIVISION

P. O. BOX 2038  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
State ☐ Fed ☒  
5. 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name Hugh
Address of Operator P. O. Box 670, Hobbs, NM 88240	9. Well No. 1
Location of Well UNIT LETTER <u>D</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>14</u> TOWNSHIP <u>22S</u> RANGE <u>37E</u> NMPM.	10. Fluid and Pool, or WHDCat Wantz Abo
15. Elevation (Show whether DF, RT, GR, etc.) 3372' GL	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

REPAIR 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 OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
REPAIR OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Add Abo perms, acid frac	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

It is proposed to perf Wantz Abo 6873-75' & 6679-81', acidize and frac as necessary.  
Well will be returned to production.

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

SIGNED <u>M. E. Atkins</u>	TITLE <u>Staff Drilling Engineer</u>	DATE <u>10-19-87</u>
APPROVED BY <u>Eddie W. Seay</u> <u>Oil &amp; Gas Inspector</u>	TITLE _____	DATE _____

ADDITIONAL APPROVALS, IF ANY:

HOBBS OFFICE  
OCT 20 1987  
RECEIVED