

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Drawer 04, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells)
30-025-05762
5. Indicate Type of Lease
STATE FEE
6. State Oil & Gas Lease No.
2601

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
B. V. CULP (NCT-B)

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.
1

2. Name of Operator
CHEVRON U.S.A. INC.

9. Pool name or Wildcat
EUMONT; YATES-7 RIVERS-QUEEN (2PD GAS)

3. Address of Operator
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON

4. Well Location
Unit Letter **J** : **2310** Feet From The **SOUTH** Line and **2310** Feet From The **EAST** Line
Section **31** Township **19S** Range **37E** NMPM **LEA** County

10. Elevation (Show whether OF, AKB, RT, GR, etc.)
3582'

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

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

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including anticipated date of starting any proposed work) SEE RULE 1103.

MIRU 10/26/95. PUMP 750 GALS 15% NEFE HCL.
FRAC PERFS F/3342'-3528' W/120,000 LINEAR GEL & 400,000 LBS 12/20 SD.
RIH W/3 3/8" TBG TO 3700'.
TURN WELL OVER TO PRODUCTION 11/3/95.

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

SIGNATURE *Wendi Kingston* TITLE **TECH. ASSISTANT** DATE: **11/21/95**

TYPE OR PRINT NAME **WENDI KINGSTON** TELEPHONE NO. **(915)687-7826**

APPROVED BY *Wendi Kingston* TITLE **DISTRICT SUPERVISOR** DATE **NOV 25 1995**

CONDITIONS OF APPROVAL, IF ANY: