

Submit 3 Copies
to Appropriate
District Office

2

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 1-1-88

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer Dd, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		API No. (assigned by OCD on New Wells) 30-025-05952																				
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>																				
2. Name of Operator CHEVRON U.S.A. INC.		6. State Oil & Gas Lease No. N/A.																				
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE		7. Lessee Name or Unit Agreement Name G.C. MATTHEWS																				
4. Well Location Unit Letter I : 2310 Feet From The SOUTH Line and 990 Feet From The EAST Line Section 6 Township 20 S Range 37 E NMPM LEA County		8. Well No. 11																				
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3558' GR		9. Foot name or Wildcat EUNICE MONUMENT																				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data: <table border="0"><tr><td colspan="2">NOTICE OF INTENTION TO:</td><td colspan="2">SUBSEQUENT REPORT OF:</td></tr><tr><td>PERFORM REMEDIAL WORK <input type="checkbox"/></td><td>PLUG AND ABANDON <input checked="" type="checkbox"/></td><td>REMEDIAL WORK <input type="checkbox"/></td><td>ALTER CASING <input type="checkbox"/></td></tr><tr><td>TEMPORARILY ABANDON <input type="checkbox"/></td><td>CHANGE PLANS <input type="checkbox"/></td><td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td><td>PLUG AND ABAN. <input type="checkbox"/></td></tr><tr><td>PULL OR ALTER CASING <input type="checkbox"/></td><td></td><td>CASING TEST AND CMT JOB <input type="checkbox"/></td><td></td></tr><tr><td>OTHER: <input type="checkbox"/></td><td></td><td>OTHER: <input type="checkbox"/></td><td></td></tr></table>			NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:		PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>	TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CMT JOB <input type="checkbox"/>		OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:																				
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>																			
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>																			
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CMT JOB <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.

WE PROPOSE TO PLUG AND ABANDON THIS WELL AS FOLLOWS:
PLUG #1, PLACE 20 SX PLUG 2850-2950' (COVERS 9-5/8" SHOE.)
PLUG #2, PERF BOTH STRINGS @ 460' SET CICR & PMP 70 SX BELOW & CIRC UP
7 " & 9-5/8" ANNULUS, LEAVE 15 SX ON TOP OF CICR.
PLUG #3, SET 10 SX SURFACE PLUG.
ALL PLUGS ARE CLASS-C NEAT MIXED AT 14.8 PPG, 1.32 CU/FT SX. DISPLACE
HOLE WITH 9.5 PPG MUD LADEN FLUID.
PULL DEAD MAN ANCHORS, FILL PITS, LEVEL LOCATION, PLACE P&A MARKER &
CHANGE STATUS OF WELL TO PLUGGED AND ABANDONED.

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

SIGNATURE Nita Rice TITLE TECHNICAL ASSISTANT

DATE: 12/21/93

TYPE OR PRINT NAME NITA RICE

TELEPHONE NO. (915)687-7436

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

DATE

CONDITIONS OF APPROVAL, IF ANY:

JAN 05 1994