

Submit 3 copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-33403

5. Indicate Type of Lease

STATE ☒

FEE ☐

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
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI
(FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER INJECTION

2. Name of Operator
CHEVRON USA INC

3. Address of Operator
15 SMITH RD, MIDLAND, TX 79705

4. Well Location

Unit Letter J : 2000 Feet From The SOUTH Line and 2550 Feet From The EAST Line

Section 32 Township 24-S Range 38-E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3192'

7. Lease Name or Unit Agreement Name

WEST DOLLARHIDE DRINKARD UNIT

8. Well No. 155

9. Pool Name or Wildcat
DOLLARHIDE; TUBB-DRINKARD

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPERATION ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: SET CIBP FOR PROFILE MODIFICATION ☒

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.

6-09-05: MIRU. REL PKR. TIH W/GAUGE RING TO 6724. TIH W/CIBP & SET @ 6655. TIH W/CMT BAILER & CAP CIBP W/35' CMT. TIH W/20 KILL STRING.

6-10-05: TIH W/PKR & SET @ 6362. GET OFF ON/OFF TOOL. CIRC W/PKR FLUID. LATCH ONTO PKR & TEST BACKSIDE TO 300 PSI. MIT TEST ON BACKSIDE FOR 30 MINS @ 300 PSI. HELD. (ORIGINAL CHART & COPY OF CHART ATTACHED).

TEST TBG AGAINST PUMP OUT PLUG @ 1500 PSI. HELD. PUMPED OUT PUMP OUT PLUG.
FINAL REPORT



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

SIGNATURE Denise Pinkerton TITLE Regulatory Specialist

DATE 6/20/2005

TYPE OR PRINT NAME Denise Pinkerton

Telephone No. 432-687-7375

(This space for State Use)

APPROVED Henry W. Wink
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE JUN 22 2005

DeSoto/Nichols 12-95 Ver 1.0

OC FIELD REPRESENTATIVE II/STAFF MANAGER

