APPROVED BY\_

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

to Appropriate District Office	Ellergy, Willicians and Waterar 1		10.202110
<u>DISTRICT I</u> P.O. Box 1980, Hobbs NM 88241-198	OIL CONSERVATION DIVISION  2040 Pacheco St.  See See NM 87505		WELL API NO. 30-025-34209
DISTRICT II P.O. Drawer DD, Artesia, NM 88210		5. Indicate Type of Lease  STATE X FEE   FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8741	0		6. State Oil & Gas Lease No.
SUNDRY NO	TICES AND REPORTS ON WEL	LS	
(DO NOT USE THIS FORM FOR F	PROPOSALS TO DRILL OR TO DEEPEN SERVOIR. USE "APPLICATION FOR PE I C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL WELL	OTHER •,		H. T. ORCUTT (NCT-E)
2. Name of Operator			8. Well No.
Chevron U.S.A. Inc.  3. Address of Operator	70702		9. Pool name or Wildcat MONUMENT; TUBB
P.O. Box 1150, Midland,		2	30 Feet From The WEST Line
Unit Letter E:1	650 Feet From The NORTH	Line andS	130 Feet From The WEST Line
Santian 2	Township 20S	Range 37E	NMPM LEA County
Section 2	10. Elevation (Show whe	ther DF, RKB, RT, GR, e	etc.)
(/////////////////////////////////////	Appropriate Box to Indicat	e Nature of Notice	e, Report, or Other Data
NOTICE OF	INTENTION TO:	SU	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
<u>-</u>	CHANGE PLANS	COMMENCE DRILLIN	NG OPNS. X PLUG AND ABANDONMENT
TEMPORARILY ABANDON	7	CASING TEST AND	CEMENT JOB
PULL OR ALTER CASING L			
OTHER:		OTHER:	The state of the s
12. Describe Proposed or Completed work) SEE RULE 1103.			dates, including estimated date of starting any proposed
SPUDDED 11" HOLE 5/20 CIRC TO SURF. DRILLI TOC @ 1200'.	5/98. DRILLED TO 1470', SET ED TO 7208', SET 5-1/2" CSG.	8-5/8" CSG. CMTD CMTD W/450 SX CL	W/450 SX CL "C", "C" & 570 SX CL "H",
4			
	Less the heat of my know	redge and helief.	
I hereby certify that the information ab	one is true and complete to the best of my know	TITLE TECHNICAL ASS	SISTANT DATE6/11/98
SIGNATURE	yrey	TITLE ILCINIONE AG	TELEPHONE NO. (915)687-7148
TYPE OR PRINT NAME J. K. RI	PLEY <i>V</i>		LETENHONE NO. (212)001-1140
(This space for State Use)			
	STATED BY CHRIS WILLIAMS		) 0 6 199 <b>8</b>