

District I
 PO Box 1980, Hobbs, NM 88241-1980
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals & Natural Resources Department

Form C-101
 Revised October 18, 1994
 Instructions on back
 Submit to Appropriate District Office
 State Lease - 6 Copies
 Fee Lease - 5 Copies
 AMENDED REPORT

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address CHEVRON U.S.A., INC. P. O. BOX 1150 MIDLAND, TX 79702		² OGRID Number 4323
		³ API Number 30-025-06848
⁴ Property Code 2615	⁵ Property Name EUNICE KING	⁶ Well No. 12

⁷ Surface Location										Approval Date:
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
A	28	21S	37E		660	NORTH	660	EAST	LEA	

⁸ Proposed Bottom Hole Location If Different From Surface									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
⁹ Proposed Pool 1 WANTZ;ABO 62700					¹⁰ Proposed Pool 2				

¹¹ Work Type Code P	¹² Well Type Code O	¹³ Cable/Rotary	¹⁴ Lease Type Code P	¹⁵ Ground Level Elevation 3428'
¹⁶ Multiple	¹⁷ Proposed Depth 7350'	¹⁸ Formation ABO	¹⁹ Contractor	²⁰ Spud Date 07/10/2000

²¹ Proposed Casing and Cement Program					
Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
NO NEW CASING					

²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

POH W/PROD EQPT. SQZ 5120-84' AS REQUIRED. DO CMT TO 5385'. DO CIBP TO 7350'. PERF 6720'-7300' W/4 JHPF. ACZ W/15% HCL. RIH W/TBG, PUMP & RODS. RETURN WELL TO PRODUCTION.

PLEASE EXPEDITE !!

Permit Expires 1 Year From Approval
 Date Unless ~~Drilling~~ Underway

Plug-Back

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION	
Signature: <i>J.K. Ripley</i>	Printed name: J.K. RIPLEY	Approved by:	Title:
Title: REGULATORY O.A.	Date: 07/03/2000	Expiration Date:	Conditions of Approval: Attached <input type="checkbox"/>
Phone: (915)687-7148			

12/19

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District I
PO Box 1900, Hobbs, NM 88241-1900
District II
PO Drawer DD, Aramita, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

* API Number 30-025-06848		* Pool Code 62700	* Pool Name WANTZ; ABO
* Property Code 2615	* Property Name EUNICE KING		* Well Number 12
* OGRID No. 4323	* Operator Name CHEVRON U.S.A., INC.		* Elevation 3428'

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	28	21S	37E		660	NORTH	660	EAST	-LEA

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

* Dedication - 1 Acre 40	* Joint or Infill	* Consolidation Code	* Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16		17 OPERATOR CERTIFICATION	
		I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief	
		<i>J. K. Ripley</i> Signature J. K. RIPLEY	
		Printed Name REGULATORY O.A. Title Date 7/3/00	
		18 SURVEYOR CERTIFICATION	
		I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.	
		Date of Survey	
		Signature and Seal of Professional Surveyor:	
		Certificate Number	