

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Form approved
Budget Bureau No. 1004-011
Expires August 31, 1985

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

3. LEASE DESIGNATION AND SERIAL NO
LC030187

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" for such proposals.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR
P.O. Box 670, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
Unit A, 1310' FNL and 210' FEL

5. WELL NO.
50

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
C. E. LaMunyon

9. FIELD AND POOL, OR WILDCAT
Teague/Blinebry

10. SEC. T. R. M. OR B.L. AND SURVEY OR AREA
Sec. 28, T23S, R37E

11. COUNTY OR PARISH 12. STATE
Lea NM

13. ELEVATIONS (Show whether OF, ST, CR, etc.)
3288'

14. PERMIT NO.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other) completion	<input type="checkbox"/>		

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Work performed: 3/29/ thru 4/8/89 TD: 5960 PB: 5870

Drilled cmt, circ. clean. Run CBL/CET w/GR&CCL. RIH and perf w/4" guns, 0° phasing at 5314', 5322', 5331', 5565', & 5661' at 1 JHPF (5 holes total). Acidize w/2500 gal 15% NEFE. Swab. Frac Blinebry perfs w/22,000 gal 40# Xlink and 41,000# 20/40 ottawa and 6,000# 20/40 RCS. Allow gels to break and frac to heal. Swab. Bail to 5796'. Unable to bail past 5796'. RIH w/100gn string shot. BO tbg, ljt above bailer at 4796'. TOF at 4796'. Jar on fish, tag TOF at 4831'. RIH to fish, recover fish and POOH. RIH w/ 2 7/8" prod. tbg to 5624' EOT. SN at 5588, TAC at 5129. RIH w/pump and rods. Space out and hang on. Turn over to production dept.

RECEIVED
APR 11 11 00 AM '89

18. I hereby certify that the foregoing is true and correct

SIGNED L. L. Edman TITLE Technical Asst. DATE 4-10-89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

SJS