

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

APR 26 1991

WELL API NO.

30-015-00180

1. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Aloka San Andres Unit

8. Well No.

107

9. Pool name or Wildcat

SAN ANDRES

SUNDY NOTICES AND REPORTS ON WELLS OFFICE

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL

☒

GAS

☐

OTHER

2. Name of Operator

CHEVRON USA INC

3. Address of Operator

P.O. Box 1150 Midland TX 79702 ATTN: RM 4111

4. Well Location

Unit Letter E : 330 Feet From The West

Line and 2972

Feet From The

South North Line

Section

12

Township

18S

Range

26

NMPM

EDDY

County

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

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 OPNS.

☐

PLUG AND ABANDONMENT

☐

CASING TEST AND CEMENT JOB

☐

OTHER:

☐

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 1101.

MIRU RIH w/6 3/4" clo to PBD @ 1737' spot 55 gals PD-104 MAKE
A FEW bit trips ACD'2 w/3000 gals 15% NEFE HCL Swab
back Run prod. Equipment. Then over to production.

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

SIGNATURE

E.O. Donerty

TITLE

T.A. Delg

DATE

4/24/91

TYPE OR PRINT NAME

E.O. Donerty

687-7812

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR DISTRICT 19

APPROVED BY

TITLE

DATE

APR 30 1991