

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |                                     |
|------------------------|-------------------------------------|
| NO. OF COPIES RECEIVED |                                     |
| DISTRIBUTION           |                                     |
| SANTA FE               | <input checked="" type="checkbox"/> |
| FILE                   | <input checked="" type="checkbox"/> |
| U.S.G.S.               | <input type="checkbox"/>            |
| LAND OFFICE            | <input checked="" type="checkbox"/> |
| OPERATOR               | <input checked="" type="checkbox"/> |

|                                |                              |
|--------------------------------|------------------------------|
| 5a. Indicate Type of Lease     |                              |
| State <input type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |                              |

|                                                                                                                                                                                                                 |                 |                                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED<br>(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.) |                 |                                                 |
| OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                                                   | JAN 09 '89      | 7. Unit Agreement Name<br>Atoka San Andres Unit |
| Name of Operator<br>Chevron U.S.A. Inc. ✓                                                                                                                                                                       | D.C.D.          | 8. Farm or Lease Name<br>ATOKA SA UT.           |
| Address of Operator<br>P.O. Box 670 Hobbs, NM 88240                                                                                                                                                             | ANTHONY, OFFICE | 9. Well No.<br>159                              |
| Location of Well<br>UNIT LETTER C, 125 FEET FROM THE North LINE AND 1665 FEET FROM THE West LINE, SECTION 14, TOWNSHIP 18S, RANGE 26E, NMPM.                                                                    |                 | 10. Field and Pool, or Wildcat<br>Atoka SA      |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3320.2                                                                                                                                                         |                 | 12. County<br>Lea EDDY                          |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

|                                             |                                           |                                                      |                                                         |
|---------------------------------------------|-------------------------------------------|------------------------------------------------------|---------------------------------------------------------|
| FORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>               | ALTERING CASING <input type="checkbox"/>                |
| FORABLY ABANDON <input type="checkbox"/>    | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/>           |
| OR ALTER CASING <input type="checkbox"/>    | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input checked="" type="checkbox"/> ck f/csg leak |

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.

Work performed 12-30 thru 12-31-88

POOH w/production equipment. Test RBP to 1000psi, ok. Test casing to 1000psi. ok. Release pkr. Swab to 1500'. Rec. 0 BO, 33 BW, EFL 1500'. Shut down to check FE. No FE. Rel RBP and POOH. LD pkr and RBP. TIH w/ 2 3/8", 4.7#, J-55, prod. tbq to 1764'. ND BOP, NUWH, turn over to production dept.

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

Signed By L. K. Elmore TITLE Technical Assistant DATE January 5, 1989

Original Signed By  
A. J. Williams

DATE JAN 16 1989

CONDITIONS OF APPROVAL, IF ANY: