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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

OIL CONSERVATION DIVISION
RECEIVED

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088
Santa Fe, New Mexico 87504-2088
FEB 25 1991

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

O. C. D.
ARTESIA, OFFICE

WELL APT NO. 30-015-22366
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name EDDY GM ST.
8. Well No. 1
9. Pool name or Wildcat MC STRAWN

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" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Chevron USA Inc.
3. Address of Operator P.O. Box 1150 Midland TX 79702 ATT: ED DOHERTY
4. Well Location Unit Letter <u>0</u> : <u>1980</u> Feet From The <u>EAST</u> Line and <u>660</u> Feet From The <u>SOUTH</u> Line Section <u>36</u> Township <u>19S</u> Range <u>27E</u> NMPM <u>LEA</u> County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3498

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 1103.

RUN NEW GR/CCL LOG PERFORM W/4" GUNS 2 SHPF 180° PHASING
52 HOLES F/ 9619-9669'. ACD'S W/6000 GAL'S 28% NEFE + 60 TONS
CO2. SWAB OR FLOW BACK RETURN TO PRODUCTION.

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

SIGNATURE E. O. Doherty TITLE J.A. Delg DATE 2/21/91
TYPE OR PRINT NAME E. O. DOHERTY TELEPHONE NO. 687-7812

(This space for State Use) ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II
APPROVED BY _____ TITLE _____ DATE FEB 25 1991
CONDITIONS OF APPROVAL, IF ANY: