OSF

Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office

OIL CONSERVATION DIVISION

P.O. Box 2088	
DISTRICT I Santa Fe, New Mexico 87504-2088	
P.O. 8ex 1980, Hobbs, NM 88240	
<u>DISTRICT II</u>	API NO. (assigned by OCD on New Weils)
P.O. Drawer Dd, Artesia, NM 88210	30-015-25151
DISTRICT III	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, Nm 87410	STATE X FEE
	6. State Oil & Gas Lease No.
	N/A
SUNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC	X 7 Jases Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	7. Lase have or One Agreement Have
(FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well:	1
OIL GAS	
WELL OTHER DRY HOLE, TA'D	EDDY "IV" STATE
2. Name of Operator	8. Well No.
CHEVRON U.S.A. INC.	1
3. Address of Operator	9. Pool name or Wildcat Shugart Y-SR-B-A-SH
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE	BRY HOLE, NEVER PRODUCED
4. Well Location	
Unit Letter A: 660 Feet From The NORTH Line and	660 Feet From The WEST Line
Section 36 Township 18S Range	31E NMPM EDDY County
10. Elevation(Show whether DF, RKB, RT, GR, etc	
3659' GR	
11 Check Appropriate Box to Indecate Nature of Notice, Report, or Out	
NOTICE OF INTENTION TO: SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTER CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABAN.
PULL OR ALTER CASING CMT JOB	1
OTHER: OTHER:	-
12. Describe Proposed or Completed Operations(Clearly state all pertinent details, and give pertinent dates, including	
esticated date of starting any proposed work) SEE RULE 1103.	
WORK PERFORMED 4-30 THRU 5-1-93	
CIRC HOLE W/10# MUD LADEN FLUID. SPOT 75 SX CMT PLUG FF	ROM 2700-1960
SPOT 25 SX CEMENT PLUG 1035-935', SPOT 25 SX CEMENT PL	
DIG OUT CELLAR, ND BOP. TAG TOC @ 283', PERF 7" CSG @ 20	•
CIRC OUT 8-5/8 CASING. RD. CUT OFF ANCHORS, CUT OFF WELL	LHEAD, COVER
PIT, CLEAN LOCATION. CHANGE STATUS OF WELL TO P & A.	0 + TD_5
OCD REP RAY SMITH NOTIFIED; DID NOT WITNESS	POR1 +10-2
	5-14-92
	Post ID-2 5-14-93 PxA-
	1711
_	
I hereby certify that the information above is trye and complete to the best of my knowledge and belief.	
SIGNITURE JULIA KUCO, TITLE TECHNICAL ASSISTANT	DATE: 5/4/93
TYPE OR PRINT NAME NITA RICE	TELEPHONE NO. (915)687-7436
	MAY 6 A 4009
APPROVED BY TITLEOIL AND GAS INSPECTOR	DATE MAY 2 8 1993
VIVE PINCE	

CONDITIONS OF APPROVAL, IF ANY:

MEGEINED

OCD HORRS OF