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			RECEIVED	C158
Form 3160-5 (June 1990)	DEPARTMENT (O STATES DF THE INTERIOR ID MANAGEMENT	AUG 1 2 1991	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
			O. C. D. ARTESIA, OFFICE	5. Lease Designation and Serial No. NM -4986
Do not use this for	n for proposals to drill o	D REPORTS ON WELLS r to deepen or reentry to a ERMIT—" for such proposa	different reservoir. Is	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE				7. If Unit or CA, Agreement Designation
2. Name of Operator				8. Well Name and No.
CHEVRON U.S.A. INC.				PACHECO FED. #7
3. Address and Telephone No. P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS 915-687-7812				3015-26557
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field and Pool, or Exploratory Area FADE-AWAY RIDGE DELAW/
760 FSL & 1880 FEL SEC. 31, T 19S, R28E UNIT O				11. County or Parish, State EDDY CO.
				NEW MEXICO
TYPE OF SUBMISSION				IT, OR OTHER DATA
		<u> </u>	TYPE OF ACTION	
_		Abandonment Recompletion		Change of Plans New Construction
Subsequent F	Кероп	Plugging Back		Non-Routine Fracturing
Final Abando	onment Notice	Altering Casing Casing Repair	SUMMARY	Water Shut-Off Conversion to Injection Dispose Water
12 Describe Description of the				(Note: Report results of multiple completion on We
give subsurface locations	and measured and true vertical deput	ent details, and give pertinent dates, includ is for all markers and zones pertinent to	ling estimated date of starting this work.)*	any proposed work. If well is directionally drili
0'-371' TD RU AND RUN 330'. PUMF	12 1/4" HOLE AT 22 8 & 1 CUT JTS. OF PED 350 SXS. CMT.,T	31-91 AT 17:00 HRS. :00 HRS. ON 7-31-91. 8 5/8", 23#, M-50 S EST BOP . WOC 31 HR IT AND CONTINUE TO D	T& C CSG. TO 3 S.	(1/2 DEG.). 70', fc at
 ** AMENDED 8 5/8" VERBAL APPROVA ^{14.} I hereby certify that the forest 	L GIVEN BY ADAM SA	PTH TO 371', DUE TO T AMEH WITH BOBBY CONE	TOP OF SALT AT E ON 7-31-91.	423'.
Signed 2. C	ute for MEA.	Tide DRILLING SUPT.		8-1-91 Date
This space for Federal or Stat	e office use)		ACC	ED FOR RECORD
Approved by Conditions of approval, if any:		Title		SUS
Title 19 11 5 C				
or representations as to any matter	it a crime for any person knowingl within its jurisdiction.	y and willfully to make to any department	at or agency of the United Sta	ates any false, fictitious or fraudulent statemen
		*See Instruction on Reverse S	Ide CARLSS	D. NEW MFXICO

10.00

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