

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

SEP 29 '89

WELL API NO.
30-015-26125
5. Indicate Type of Lease
STATE ☒ FEE ☐
6. State Oil & Gas Lease No.

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 ☐ GAS WELL ☒ OTHER

2. Name of Operator
Chevron U.S.A. Inc.

3. Address of Operator
P.O. Box 670 Hobbs NM 88240

4. Well Location
Unit Letter G : 1980 Feet From The north Line and 1980 Feet From The east Line
Section 2 Township 20S Range 29E NMPM Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3322.8'

7. Lease Name or Unit Agreement Name
Eddy "IK" State

8. Well No.
1

9. Pool name or Wildcat
UNDSG Strawn/Burton Flat East

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: Run Csg. ☒

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 1103.

9/21-24/89 Drlg. & survey 12 1/4" hole from 1165' to 3510'.
9/24/89 T.D. 12 1/4" hole @ 3510' run logs.
9/25/89 Finished running logs & ran 36 jts. 8 5/8" 32# K-55 set @ 3510'.
Cmt. 8 5/8" W/1100sx CL 'C' lead & 300sx CL 'C' tail, didn't
circulate cmt. Ran temp. survey TOC @ 300'. WOC for 27 hrs
before drilling out.

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

SIGNATURE F.H. Smith TITLE Drilg. Engr. DATE 9/28/89
TYPE OR PRINT NAME F.H. Smith TELEPHONE NO. 393-4121

(This space for State Use)

ORIGINAL SIGNED BY
MIKE L. HAMS
SUPERVISOR, DISTRICT I

APPROVED BY _____ DATE SEP 29 1989
CONDITIONS OF APPROVAL, IF ANY: _____