

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

455
dp
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 - 8 '89

WELL API NO. 30-015-26169
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Agave IK State
8. Well No. 1
9. Pool name or Wildcat Parkway Delaware
10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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 C : 330 Feet From The north Line and 2310 Feet From The west Line

Section 2 Township 20S Range 29E NMPM Eddy County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	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.

Spud 26" hole 8/30/89. Drilling & surveying to 452'. TD 26" hole 8/31/89. Run 11 jts. of 20" csg. 94# H-40 set @ 450'. W/Texas pattern shoe. Cemented W/ 1125sx Class C. Circ 350sx to surface. Cut off And weld on wellhead. WOC for 18 hrs.

9/2/89 Drlg 17 1/2" hole. Drlg. and survey to 1159'. TD 17 1/2" hole 9/2/89.

Ran 26 jts. 13 3/8" 48# H-40 FC @ 1068' Cement W/900 sx of Class C Tail cmt 450 sx Class C Circ. 300sx..Cut 20" weld on 13 3/8" head.. WOC 18 hrs.

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

SIGNATURE M. E. Akins TITLE Staff Drlg. Engr. DATE 9/7/89

TYPE OR PRINT NAME M.E. Akins TELEPHONE NO. 393-4121

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT I

APPROVED BY _____ TITLE _____ DATE SEP 8 1989

CONDITIONS OF APPROVAL, IF ANY: