

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS/ED

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	APR 25 '88	5. LEASE DESIGNATION AND SERIAL NO. NM 41645
2. NAME OF OPERATOR Chevron U.S.A. Inc.	C.C.D.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 670, Hobbs, New Mexico 88240	ARTESIA, OFFICE	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit F 1650 FNL and 1650 FWL		8. FARM OR LEASE NAME Federal 13 Com
		9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT White City Penn
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13, T25S, R26E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, ST, CR, etc.) 3241'	12. COUNTY OR PARISH 13. STATE Eddy NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

TD: 11,774' PBD: 11,640'

It is proposed to cement off a waterflow up the 7 5/8" x 10 3/4" annulus in this well that is coming from an offset SWD well. The annulus currently has a SICP=600psi and will flow water at a rate of 73 BW/HR. This work should be considered an operating necessity in order to comply with BLM and NMOCD regulations.

18. I hereby certify that the foregoing is true and correct

SIGNED M. E. Abner

TITLE Staff Drilling Engr.

DATE April 15, 1988

(This space for Federal or State office use)

APPROVED BY Don McCrumb

TITLE AREA MANAGER  
CARLSBAD RESOURCE AREA

DATE 4-20-88

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side