

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

API NO. (assigned by OCD on New Wells) 30-025-23324	
6. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
8. State Oil & Gas Lease No. N/A	
7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT	
8. Well No. 106	9. Pool name or Wildcat ARROWHEAD/GB

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTION <input type="checkbox"/>	
2. Name of Operator CHEVRON U.S.A. INC.	
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS	
4. Well Location Unit Letter <u>G</u> : <u>2105</u> Feet From The <u>NORTH</u> Line and <u>1650</u> Feet From The <u>EAST</u> Line Section <u>25</u> Township <u>21S</u> Range <u>36E</u> NMPM <u>LEA</u> County	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3528 GL	

11 Check Appropriate Box to Indecate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CMT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>SOZ, PERF AND STIMULATE</u> <input checked="" type="checkbox"/>	

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.

IT IS PROPOSED TO :
SQUEEZE OFF PERFS AT 3730'-96'.
PERFORATE AT 3864-66 WITH 4 HOLES AND SQUEEZE OFF ZONE #5.
PERFORATE ZONE #5 WITH 12 HOLES, ACDZ WITH 15% NEFE.
PERF ZONES 1-4, 3680-3834. ACDZ PERFS AND SWAB TEST.
INSTALL IPC TUBING AND INJECTION PACKER.
CONVERT TO INJECTION.
WELL FORMER NAME W.A. RAMSAY (NCT-B) #5

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

SIGNATURE <u>P.R. Matthews</u>	TITLE <u>TECH. ASSISTANT</u>	DATE: <u>6-3-92</u>
TYPE OR PRINT NAME <u>P.R. MATTHEWS</u>	TELEPHONE NO. <u>(915)687-7812</u>	
APPROVED BY <u>Paul Kautz</u> Geologist	TITLE _____	DATE _____

CONDITIONS OF APPROVAL, IF ANY: