

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT --" for such proposals

SUBMIT IN TRIPLICATE

RECEIVED

1. Type of Well: ☐ OIL WELL ☒ GAS WELL ☐ OTHER

JUN 30 2005

2. Name of Operator  
CHEVRON USA INC

OOD-ARTERIA

3. Address and Telephone No. 15 SMITH RD, MIDLAND, TX 79705 432-687-737

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Unit Letter F : 1850' Feet From The NORTH Line and 1700' Feet From The  
WEST Line Section 15 Township 22-S Range 23-E

5. Lease Designation and Serial No.

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number  
HELBING FEDERAL GAS COM  
1

9. API Well No.  
30-015-10769

10. Field and Pool, Exploaratory Area  
INDIAN BASIN; UPPER PENN

11. County or Parish, State  
EDDY, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

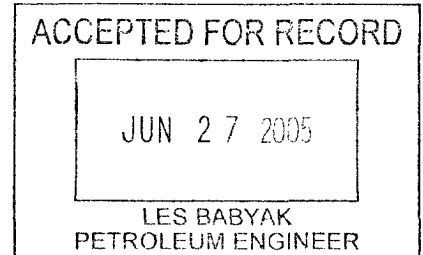
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> OTHER: C/O & ACIDIZE W/CT
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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.)\*.

6-06-05: MIRU.

6-07-05: TIH W/COIL TBG. PUMPING 413 SCFM. TAG FILL @ 7493. SPOT 2 BBLS WTR. CIRC. TIH & PUMP 413 SCFM N2. TAG FILL & CLEAN OUT TO 7515. ACIDIZE PERFS 7224-7463 W/1000 GALS 15% HCL & SONIC HAMMER & 413 SCFM N2. JET WELL FR TD. RD CTU.



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

SIGNATURE *Denise Pinkerton* TITLE Regulatory Specialist DATE 6/16/2005

TYPE OR PRINT NAME Denise Pinkerton

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.