

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

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

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

2. Name of Operator
CHEVRON USA INC

3. Address and Telephone No. 15 SMITH ROAD, MIDLAND, TX 79705 915-687-7375

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit Letter G : 1650' Feet From The NORTH Line and 1725' Feet From The

EAST Line Section 8 Township 22-S Range 23-E

5. Lease Designation and Serial No.

NM-045272

6. If Indian, Alottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number

BOGLE FLATS

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9. API Well No.

30-015-32041

10. Field and Pool, Exploratory Area
LOAFER DRAW MORROW

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: MORROW COMPLETION
	<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.)

7-11-03: MIRU KEY #175.

7-12-03: TAG TOP OF CMT @ 6677'.

7-13-03: DRILL OUT CMT FR 6677-6789 (LINER TOP) DRILL OUT CMT FR 6789-6805. FELL FREE. TAG @ 9220' (PBTD).

7-14-03: SPOT 200 GALS ACETIC ACID ACR PERF INTERVAL. TIH W/CBL/GR/CCL.

7-15-03: PERF LOWER MORROW @ 9072-89. TIH W/PKR & SET @ 6854'. TIH W/2 7/8" TBG TO 4586'.

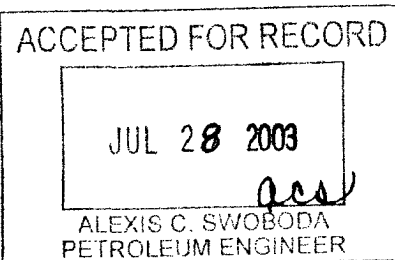
7-16-03: PICKLE TBG W/500 GALS 15% HCL.

7-18-03: PRESS TBG TO 1000#. LOST 140# IN 10 MINS. TBG LEAK.

7-21-03: RIG DOWN. RELEASE RIG.

7-22-03: CHECK PRESSURES. SITP-2000#. SICP-2000#. BOTH SIDES EQUALIZED. (PROBABLE TBG LEAK). BLEEDN DN TBG TO 0 PSI.

CSG PRESS DROPPED TO 1640#. MONITORED CSG FOR 1 HR. CSG PRESS DROPPED FR 1640# TO 1240# IN 1 HR. CLOSE WELL IN.



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

SIGNATURE *Denise Leake* TITLE Regulatory Specialist

DATE 7/23/2003

TYPE OR PRINT NAME Denise Leake

(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.