

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons
811 S. 1st Street
Artesia, NM 88212

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

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

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

Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of well
 Oil Gas Other

2. Name of Operator
CHEVRON U.S.A. INC.

3. Address and Telephone No.
P. O. Box 1150, Midland, TX 79702 (915)687-7148

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
**330' FNL & 1650' FWL UNIT C
 SEC. 1, T23S, R28E**

5. Lease Designation and Serial No.
NM-91078

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
N/A

8. Well Name and No.
LENTINI 1 FEDERAL #2

9. API Well No.
30-015-27534

10. Field and Pool, or Exploratory Area
HERRADURA BEND;DELAWARE,EAST

11. County or Parish, State
EDDY, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

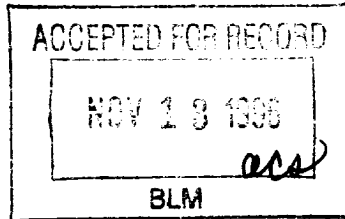
12	TYPE OF SUBMISSION	TYPE OF ACTION
	<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
	<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
	<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
		<input type="checkbox"/> Casing Repair
		<input type="checkbox"/> Altering Casing
		<input checked="" type="checkbox"/> Other ADD PERFS
		<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 estimate 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.)*

POH W/PROD EQPT. SET RBP @ 5893', PICKLE TBG W/400 GALS 15% HCL & REVERSE OUT.
 PERF 5958-68' W/2 JHPF. ACIDIZE W/750 GALS 15% NEFE & 40 RCNB'S. FRAC W/18,000 GALS XL
 PAD & 15,400 GALS LINEAR GEL W/48,000# 16/30 BS. TAG SAND @ 5990', CIRC CLEAN. RIH
 W/TBG, PUMP & RODS; TBG @ 6237'. RETURN WELL TO PRODUCTION.

WORK PERFORMED 3/20/96-3/27/96.



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

Signed *G. K. Ripley* Title T. A. Date 10/23/96

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____

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.

*See Instructions on Reverse Side