| Submit 3 copies to Appropriate District Office   | <i>,</i>                              | State of N<br>Energy, Minerals and Natu |        | •                     |  | Form C-103   |
|--|---------------------------------------|---|--------|-----------------------|--|--|
|  |                                       | •                                       |        |                       |  | Revised 1-1-89   |
| OIL CONSERVATION DIVISION  |                                       |   |        |                       | WELL API NO.   |  |
| P.O. Box 1980, Hobbs, NM 88240  DISTRICT II  P.O. Box 2088   |                                       |   |        |                       | 30-025-33403   |  |
| P.O. Box Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088  |                                       |   |        |                       | 5. Indicate Type of Lease  |  |
| DISTRICT III   |                                       |   |        |                       | STATE  | FEE  |
| 1000 Rio Brazos Rd., Aztec, N  | NM 87410                              |   |        |                       | 6. State Oil / Gas Lease No.   |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  |                                       |   |        |                       |  |  |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.   |                                       |   |        |                       | 7. Lease Name or Unit Agreement N<br>WEST DOLLARHIDE DRINKAR   |  |
| 1. Type of Well: OIL WELL  | GAS WELL                              | OTHER                                   |        |                       |  |  |
| 2. Name of Operator CHEVRON USA INC  |                                       |   |        |                       | 8. Well No.<br>155   |  |
| 3. Address of Operator   | 15 SMITH ROAD                         | ), MIDLAND, TX 79705                    |        |                       | 9. Pool Name or Wildcat DOLLARHIDE; TUBB-DF  | RINKARD  |
| 4. Well Location   |                                       |   |        |                       |  |  |
| Unit Letter <u>J</u> : <u>2000</u> Feet From The <u>SOUTH</u> Line and <u>2550</u> Feet From The <u>EAST</u> Line  |                                       |   |        |                       |  |  |
| Section 32   | Distriction of Colombian and American |   |        | ange <u>38-E</u> NM   | PM LEA_C   | OUNTY  |
| 11.  |                                       | Elevation (Show whether DF,             |        | 3192                  |  | 4.70年,   |
| Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  |                                       |   |        |                       |  |  |
| NOTICE OF I  | NTENTION T                            | TO:                                     |        | SU                    | BSEQUENT REPORT  | OF:  |
| PERFORM REMEDIAL WORK  | PLU                                   | JG AND ABANDON                          | П      | REMEDIAL WORK         | ALTERING CASING  | •  |
| TEMPORARILY ABANDON  | ☐ CH/                                 | ANGE PLANS                              | $\Box$ | COMMENCE DRILLING OPE | RATION PLUG AND ABAND  | ONMENT   |
| PULL OR ALTER CASING   |                                       |   |        | CASING TEST AND CEMEN |  |  |
| OTHER:   |                                       |   | П      | OTHER:                | CONVERT TO INJECTION   | <b>✓</b>   |
| OTTLET.  |                                       |   |        | OTTIET.               |  |  |
| Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.   |                                       |   |        |                       |  |  |
| 10-11-04: MIRU KEY #331. REL TAC. 10-12-04: TAG CIBP @ 6740. TIH W/RBP & PKR. SET RBP @ 6418. SET PKR @ 6387. TOH W/RBP & PKR. 10-13-04: TIH W/SONIC HAMMER TOOL ON WS. ACID WASH PERFS 6446-6700 W/4000 GALS 15% ANTI-SLUDGE HCL. RU SWAB. 3 RUNS. TBG DRY. CHANGE OVER TO 2 3/8" MOVE OUT 2 7/8" WS. 10-14-04: PU INJ PKR & 205 JTS 2 3/8" TBG. SET PKR @ 6367. REL FROM ON/OFF TOOL. DISPL W/CBW. ENGAGE ON/OFF TOOL. 10-15-04: RUN MIT @ 575 PSI. CHART FOR 30 MINS. OK. (ORIGINAL CHART & COPY OF CHART ATTACHED). RIG DOWN. TURN WELL OVER TO PROD TO HOOK UP INJ EQPT. FINAL REPORT |                                       |   |        |                       |  |  |
|  |                                       |   |        |                       | 18 PUTTINED OCH AS A CONTROL OCH AS A CO | 17.7.7.3.7.4.25.26.27.25.25.25.25.25.25.25.25.25.25.25.25.25. |
|  |                                       |   |        |                       |  |  |
|  | (/                                    | 2 <u>u</u>                              | )F     | x-804                 |  |  |
| I hereby certify that the information above is   | true and complete to the t            | best of my knowledge and belief.        |        |                       |  |  |

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

SIGNATURE

SIGNATURE

TYPE OR PRINT NAME

Denise Leake

WH - SCH

TITLE Regulatory Specialist

DATE 10/25/2004

Telephone No. 915-687-7375

(This space for State Use)

APPROVED Harry W. Winks

CONDITIONS OF APPROVAL, IF ANY:

TITLE OC PIELD REPRESENTATIVE II/STAFF MANAGER

OCT 2 7 2004

