

State of New Mexico  
Energy, Minerals and Natural Resources

HOBBBS OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
SEP 28 2011 Santa Fe, NM 87505

WELL API NO. 30-025-37180
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name W.T. MCCOMACK
8. Well Number 22
9. OGRID Number 4323
10. Pool name or Wildcat PENROSE SKELLY; GRAYBURG
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 ☒ Gas Well ☐ Other ☐

2. Name of Operator

CHEVRON U.S.A. INC.

3. Address of Operator

15 SMITH ROAD, MIDLAND, TEXAS 79705

4. Well Location

Unit Letter B: 920 feet from the NORTH line and 1490 feet from the EAST line

Section 32

Township 21-S

Range 37-E

NMPM

County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

## 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐PULL OR ALTER CASING ☐MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐P AND A ☐CASING/CEMENT JOB ☐

OTHER:

OTHER: ACIDIZE &amp; SCALE SQUEEZE

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5-12-11: MIRU. TAG FILL @ 4141.

5-13-11: TIH W/TBG. TEST W/SONIC HAMMER.

5-14-11: ACIDIZE W/6000 GALS ACID &amp; 200 BBLS 2% KCL WTR W/3 DRUMS SCW-358 SCALE INHIB.

5-16-11: TIH W/TBG. SET TAC.

5-17-11: TIH W/PUMP &amp; RODS. RIG DOWN.

Spud Date:

Rig Release Date:

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

SIGNATURE

TITLE

REGULATORY SPECIALIST

DATE 09-21-2011

Type or print name DENISE PINKERTON

E-mail address: leakejd@chevron.com

PHONE: 432-687-7375

APPROVED BY:

TITLE

STATE MAR

DATE

9-29-2011

Conditions of Approval (if any):

SEP 29 2011