Submit 3 copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office			Revised 1-1-
DISTRICT I	OIL CONSER'	VATION DIVISION	WELL API NO.
P.O. Box 1980, Hobbs, NM 8	P.O.	Box 2088	30-025-06978
DISTRICT II: Santa Fo. New Movice 87504 2088		5. Indicate Type of Lease	
P.O. Box Drawer DD, Artesia, NM 88210 DISTRICT III		STATE FEE .	
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil / Gas Lease No.
	NDRY NOTICES AND REPORTS	ONWELLS	
(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 Name CENTRAL DRINKARD UNIT
1. Type of Well: OIL GAS OTHER INJECTOR			
2. Name of Operator CHEVRON USA INC			8. Well No. 141
3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705			9. Pool Name or Wildcat
4. Well Location			DRINKARD
Unit Letter	E:1980'Feet From Th	ne NORTH Line and 660'	Feet From The WEST Line
Section 33	Township 21-S	Range <u>37-E</u> NN	MPM <u>LEA</u> COUNTY
	10. Elevation (Show wheth	er DF, RKB, RT,GR, etc.)	
11.	Check Appropriate Box to Indi	cate Nature of Notice, Report	, or Other Data
NOTICE OF I	NTENTION TO:	l su	JBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OP	
PULL OR ALTER CASING		CASING TEST AND CEME	L.
OTHER:		OTHER:	
OTTIER.		U THER:	TA STATUS
NEW PBTD OF 6310.	P TO 500 PSI & CHART FOR 30 MINS		500 PSI FOR 20 MINSOK. CAP W/35' CMT FO
FINAL REPORT			
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$\sim \vee$	s true and complete to the best of my knowledge and belief.	F Regulatory Specialist	
SIGNATURE (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	130 MAYNOTOTIL	E reduigion à obecigiest	DATE <u>5/18/2005</u>
TYPE OR PRINT NAME	Denise Pinkerton		Telephone No. 432-687-7375
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(This space for State Use)	1. \1. \—L		
APPROVED Say	W.WIND OC FIFIN	PEDDEO	14AV 2 2
CONDITIONS OF APPROVA	IF ANY:	representative II/Staff M	DATE MAY 2 0 2005
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