## Submit 3 copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District Office		·	Revis	sed 1-1-89
<u>DISTRICT I</u>	OIL CONSERV	ATION DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240			30-025-06658	
Santa Fe New Maying 87504, 2088			5. Indicate Type of Lease	
P.O. Box Drawer DD, Artesia, NM 882	10		STATE	FEE 🗸
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	)		6. State Oil / Gas Lease No. 471890	
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			公司基础公司等基础会员。在产品证	TERM !
			7. Lease Name or Unit Agreement Name	
	M C-101) FOR SUCH PROPOSA		H.T. MATTERN 'C'	
	AS OTHER			
Name of Operator     CHEVRON USA INC			8. Well No.	
Address of Operator			9. Pool Name or Wildcat PENROSE SKELLY GRAYBURG	
4. Well Location			7 ENROGE SKEELT GRATBORG	
Unit Letter K_:	1980' Feet From The	SOUTH Line and 1980'	Feet From The WEST Line	
Section 18	Township 21-S	Range <u>37-E</u> N	IMPM <u>LEA</u> COUNT	Y
	10. Elevation (Show whether D	OF, RKB, RT,GR, etc.) 3519' DR	=	Tarr
11. Check	Appropriate Box to Indica	te Nature of Notice, Repo	rt, or Other Data	
NOTICE OF INTENT	ION TO:	S	SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING O	PERATION PLUG AND ABANDONMEN	NT 🗍
PULL OR ALTER CASING		CASING TEST AND CEM	ENT JOB	
OTHER:		OTHER:	ACIDIZE & SCALE SQZ	<b>✓</b>
proposed work) SEE RULE 1103.  11-28-05: MIRU. SET RACKS. 11-29-05: TIH W/BIT, X-O, WORK S' 11-30-05: TIH W/BIT. TAG @ 3880. I 12-01-05: TAG @ 3913. NO FILL. TII 12-02-05: ACIDIZE OPEN HOLE 367 12-05-05: SWAB. TOH W/PKR. TIH ' 12-06-05: C/O TO 3913. TIH W/PKR 12-07-05: REL PKR. TIH W/PROD 2 12-08-05: TIH W/PUMP & RODS. F	TRING, 104 JTS. PULL UP 11 STANDS. C/O 391 H & SET PKR @ 3634. '4-3913 W/5000 GALS 15% NE W/BIT TO 3246. . PUMP SCALE CHEMICAL. 7/8" TBG.	3.	dates, including estimated date of starting of the starting of	
I hereby certify that the information above is true and office SIGNATURE  TYPE OR PRINT NAME	fete to the best of phy knowledge and belief.  ### TITLE  Denise Pinkerton	Regulatory Specialist	DATE12/13/200 Telephone No. 432-6	05 687-7375
(This space for State Use)  APPROVED  CONDITIONS OF APPROVAL, IF ANY:	Clum OC DISTRICT	SUPERVISOR/GENERAL M	DEC 1 6  DATE  DeSoto/Nichols 12-93 ver 1.0	2005