

OCD-HOBBS

Form 3160-5
(June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICES AND REPORTS ON WELLS

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

Use "APPLICATION FOR PERMIT --" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well: ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. Name of Operator
CHEVRON USA INC

3. Address and Telephone No. 15 SMITH RD, MIDLAND, TX 79705 432-687-737

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit Letter H : 1980 Feet From The NORTH Line and 990 Feet From The
EAST Line Section 31 Township 24S Range 38E

5. Lease Designation and Serial No.
NM-10186

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and Number
WEST DOLLARHIDE DRINKARD UNIT
91

9. API Well No.
30-025-24035

10. Field and Pool, Exploratory Area
DOLLARHIDE TUBB DRINKARD

11. County or Parish, State
LEA, NM

12. Check Appropriate Box(s) To Indicate Nature of Notice, Report, or Other Data

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> OTHER: TBG LEAK - RTRN TO PROD </div> <div> <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 </div> </div>

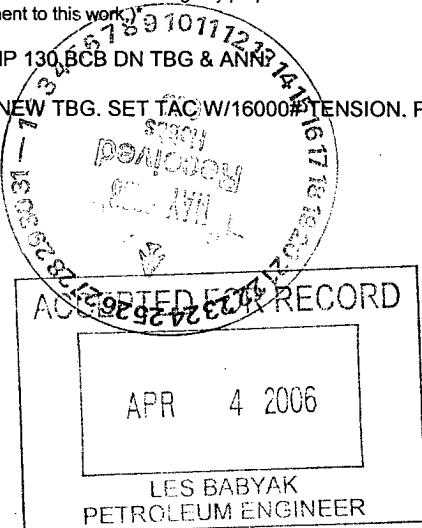
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated 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.)

3-15-06: MIRU. TEST ANCHORS. BLEED TBG DN. UNSEAT PUMP & TOH W/RODS & PUMP PUMP 130 BCB DN TBG & ANN.
 3-16-06: TIH & TAG BTM @ 6744. INSPECT TBG. TIH W/3" BHA & 41 JTS 2 3/8" TBG.
 3-17-06: PUMP 100 BCB DN TBG & ANN. UNLOAD & RACK NEW TBG. TIH W/BHA TO 6713'. PU NEW TBG. SET TAC W/16000# TENSION. PU PUMP & TIH W/RODS.
 3-18-06: TIH W/PUMP & RODS. SPACE & HANG ON. LOAD & TEST. RIG DOWN. WAIT ON TEST

RETURN TO PRODUCTION.

3-25-06: ON 24 HR OPT. PUMPING 24 OIL, 16 GAS, & 147 WATER



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

SIGNATURE Denise Pinkerton TITLE Regulatory Specialist DATE 3/27/2006

TYPE OR PRINT NAME Denise Pinkerton

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

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.