Submit 3 copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District Office				•		Revise	ed 1-1-89	
DISTRICT I		OIL CONSE	RVATIO	ON DIVISION	WELL API NO.			
P.O. Box 1980, Hobbs, NM 88240					30-025-10259			
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, 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					7. Lease Name or Unit Agreement Name			
(FORM C-101) FOR SUCH PROPOSALS.						HUGH		
1. Type of Well: OIL WELL	GAS WEL							
2. Name of Operator CHEVRON USA INC					8. Well No.			
3. Address of Operator 15 SMITH RD, MIDLAND, TX 79705					9. Pool Name or Wildcat PENROSE SKELLY GRAYBURG			
4. Well Location								
Unit Letter	<u>B</u> :	660' Feet From	The <u>NORT</u>	H Line and 1980'	Feet From ⁻	The EAST Line		
Section 14		Township 22-S	R	ange <u>37-E</u> NI	MPM	LEA_COUNTY		
		10. Elevation (Show wh	ether DF, RKB,	RT,GR, etc.) 3347'		a newspires		
11.	Check A	ppropriate Box to Ir	ndicate Nati	ure of Notice, Report	t, or Other D	ata		
NOTICE OF	INTENTIO	ON TO:		S	UBSEQUE	NT REPORT OF:		
PERFORM REMEDIAL WOR	K 🗌	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASING		
TEMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLING OF	PERATION [PLUG AND ABANDONMENT		
PULL OR ALTER CASING				CASING TEST AND CEME	NT JOB			
OTHER:				OTHER:	ACIDIZE & S	SCALE SQUEEZE		
proposed work) SEE R 6-19-06: MIRU KEY #169 6-20-06: PUMP 60 BBLS 6-21-06: ACIDIZE 3850-4 6-22-06: RU SWAB. 6-23-06: SWABBING. PU 6-26-06: TIH W/PROD TE 6-27-06: TIH W/2" PUMP RIG DOWN. FINAL REPO	. PUMP 50 BI DN CSG. TIH 054 W/7500 0 MP SCALE S GG, BPMA, PI & RODS. SF	I W/BIT TO 5011, 159 J GALS 15% ANTI-SLUD QUEEZE W/RE-4777 I ERF SUB, SN, 19 JTS,	TS. TIH W/W: GE HCL. SPO FLUSH W/200 TAC, 110 JTS	S, PPI TOOLS TO 4125. IT 25.3 BBLS. REL PPI T D BBLS. I, W/TAC @ 3502. SN @	MARK SETTII OOL. FLUSH	CSG W/40 BBLS. SET PKF	₹.	
I hereby certify that the infopfishion abov	e is true and complete	s to the bast of my knowledge and bet	ief.			Set	15 18 9 10 11 12 18 18 18 18 18 18 18 18 18 18 18 18 18	
SIGNATURE SALL	se Yur	ar /		latory Specialist		DATE 6/29/2006		
TYPE OR PRINT NAME	D	enise Pinkerton				Telephone No. 432-68	37-7375	
(This space for State Use) APPROVED LAW CONDITIONS OF APPROVA	L, IF ANY:	k TITLE	iei m repre	SENTATIVE 11/STAFF	MANAGER DATE	JUL 0 5 2006 E DeSoto/Nichots 12-93 ver 1.0		

OC FIELD REFRESENTATIVE II/STAFF MANAGER