Submit 3 copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

District Office			-		R	evised 1-1-89
OIL CONSERVATION DIVISION				WELL API NO.		
P.O. Box 1980, Hobbs, NM 88240				3002530200		
Santa Fe, New Mexico 87504-2088				5. Indicate Type		
P.O. Box Drawer DD, Artesia, NW 66210				STATE FEE		
DISTRICT III				6. State Oil / Ga		
1000 Rio Brazos Rd., Aztec, NM 87410					308357	Control of the Control
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO						=1
DIFFERENT RES	SERVOIR. USE "APPLICATION	N FOR F			e or Unit Agreement Name	₹
	M C-101) FOR SUCH PROPOS	SALS.		HARRISON,	B. F B -	
1. Type of Well: OIL GAS OTHER						
Name of Operator CHEVRON	I USA INC			8. Well No.	1	
Address of Operator 15 SMITH ROAD, MIDLAND, TX 79705				9. Pool Name or Wildcat NORTH TEAGUE DRINKARD ABO		
4. Well Location						
Unit Letter C: _	593 Feet From The	_ NORT	H Line and 1707	Feet From T	he WEST Line	•
Section 9	Township23S	R	ange 37E NN	/IPM	LEA COU	YTY
	10. Elevation (Show whether I	DF, RKB,	RT,GR, etc.) 3314'		in Light.	
11. Check	Appropriate Box to Indica	ate Nat	ure of Notice, Report	, or Other Da	ata	
NOTICE OF INTENT	ION TO:		SU	JBSEQUE	NT REPORT OF	:
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK		ALTERING CASING	П
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OF				ERATION	PLUG AND ABANDONN	
CACING TEST AND CEME				_		
PULL OR ALTER CASING		OTHER:			CAB LINNER	✓
OTHER:			OTTIER.			
 Describe Proposed or Completed of proposed work) SEE RULE 1103. 7-28-03: MIRU PU. TIH TO 7150'. Pt 7-29-03: PU SCAB LINNER PKR & T @ 5125')TIH W/WS. 7-30-03: TIH TO 7112'. SN @ 7076. TURN WELL OVER TO PRODUCTION 	J ABOVE PERFS. 'BG. TIH W/LINNER TO 5235'. RIG DOWN.					
FINAL REPORT						
			10 18 16 17 18 19 10 10 10 10 10 10 10 10 10 10 10 10 10	030 030 500H 031 600 C	25 26 23 30 37 7 7 8 10 5 6 5 6 5 6 5 6 5 6 5 6 5 6 6 6 6 6 6	
I hereby certify that the information above is true and comp	σ IZ .)	Regi	latory Specialist		DATE NO. 110	002
SIGNATURE	Value TITLE	i vegt	natory opolianist		DATE7/31/2	UU3

OC FIELD REPRESENTATIVE II/STAFF MANAGER

Denise Leake

TYPE OR PRINT NAME

DATE

AUG 0 7 2003 DeSoto/Nichols 12-93 ver 1.0

915-687-7375

Telephone No.