State of New Mexico Submit 3 copies to Appropriate District Office Form C-103 Energy, Minerals and Natural Resources Department Revised 1-1-89 DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-09509 DISTRICT II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Box Drawer DD, Artesia, NM 88210 FEE [ STATE 🗸 **DISTRICT III** 6. State Oil / Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS. **EUGENE COATS** OIL 1. Type of Well:  $\checkmark$ WELL WELL **OTHER** 2. Name of Operator 8. Well No. CHEVRON USA INC 5 3. Address of Operator 9. Pool Name or Wildcat 15 SMITH ROAD, MIDLAND, TX 79705 LANGLIE MATTIX 7 RVR QN GRAYBURG 4. Well Location Feet From The SOUTH Line and 660' 1980' \_Feet From The <u>EAST</u> Unit Letter Section 24-S Township. Range <u>36-E</u> NMPM LEA COUNTY 10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3385' DF Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING CHANGE PLANS **TEMPORARILY ABANDON** COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: REQUEST FOR TA OTHER: ~ 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. 12-10-03: MIRU KEY. 12-11-03: NOTIFIED NMOCD. TIH W/CIBP & SET @ 3160. TEST CSG TO 500 PSI-OK. 12-12-03: CHARTED CIBP TO 500 PSI FOR 30 MINS - OK. (ORIGINAL CHART & COPY OF CHART ATTACHED). FINAL REPORT WELL IS TEMPORARILY ABANDONED. WELL IS UNECONOMICAL TO PRODUCE AND IS BEING EVALUATED FOR FUTURE USE. This Approval of Temporary //21/09 Abandonment Expires

Thereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

SIGNATURE

Denise Leake

Denise Leake

Denise Leake

Telephone No. 915-687-7375

(This space for State Up)

APPROVED Laury W. W. L.

CONDITIONS OF APPROVAL, IF ANY:

TITLE

OC FIELD REPRESENTATIVE II/STAFF MANAGER

JAN 2 1 2004

