

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-103  
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer Dd, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		API NO. (assigned by OCD on New Wells) <b>30-025-02719</b>
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>CHEVRON U.S.A. PRODUCTION COMPANY</b>		6. State Oil & Gas Lease No. <b>E-8266</b>
3. Address of Operator <b>P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS</b>		7. Lease Name or Unit Agreement Name <b>STATE "TB"</b>
4. Well Location Unit Letter <b>V B</b> : <b>660</b> Feet From The <b>SOUTH</b> Line and <b>1980</b> Feet From The <b>WEST</b> Line Section <b>2</b> Township <b>16S</b> Range <b>35E</b> NMPM <b>LEA</b> County		8. Well No. <b>1</b>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <b>3987 GE</b>		9. Pool name or Wildcat <b>TOWNSEND - Permian Upper Permian</b>

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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CMT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <b>REPAIR CASING LEAK</b> <input checked="" type="checkbox"/>	

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.

POOH WITH PRODUCTION EQUIP. SET RBP AT 10150.  
TIH AND ISOLATE CASING LEAK AT 4870-4934.  
TIH AND SET CICR AT 4798'.  
PUMP 100 SXs. OF CEMENT INTO CICR.  
DRILL OUT CICR TO 4880', TEST CASING TO 500 PSI-OK.  
TIH AND REL. RBP AT 10150, POOH.  
TIH WITH PRODUCTION EQUIP. AND RETURN TO PRODUCTION ON 5-1-92.

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

SIGNATURE P. R. Matthews TITLE **TECH. ASSISTANT** DATE: **5/4/92**

TYPE OR PRINT NAME **P.R. MATTHEWS** TELEPHONE NO **(915)687-7812**

APPROVED BY Orig. Signed by Paul Kautz Geologist TITLE Geologist DATE May 06 1992

CONDITIONS OF APPROVAL, IF ANY: