

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Dep

Form C-100
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 Grande Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-29174

2. Indicate Type of Lease
STATE ☒ FEE ☐

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 A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL ☒ GAS ☐ OTHER ☐

2. Name of Operator
Chevron U.S.A. Inc.

3. Address of Operator
15 Smith RD Midland TX 79702 P.O. Box 1150

4. Well Location
Unit Letter B : 660 Feet From The North Line and 1650 Feet From The EAST
Section 10 Township 16S Range 32E NMPM LEA County LEA

7. Lease Name or Unit Agreement Name

8. Well No.

9. Foot name or Wildcat
Anderson RANCH Wolfcamp

10. Elevation (Show whether OF, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER: ☐	CASING TEST AND CEMENT JOB ☐	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.

Tag TOC @ 9340 CIRC wellbore w P+H mud spot cmt plug fr 9000-8750 w/35sx
spot plug fr 6791-6744 w/35sx.
RU CSG JACKS FREE point & cut 5 1/2" CSG @ 5725 POT Rec 132 jts + 2 cut
jts (5704) SET 20' sx plug @ 5759. TAG plug @ 5679 top of CSG @
5719 SET 50' sx plug @ 3066. TIH to 3066 SET 100' sx cmt plug
@ 3066 WOC 4 HRS TAG plug @ 2867 SET 30' sx plug fr 457-325
SET 43' surf plug INSTALL DRY hole marker.
WORK STARTED 8/22/90 ENDED 8/28/90

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

SIGNATURE M. E. Abin DATE 9/5/90 TITLE Drilg Supl.

TYPE OR PRINT NAME

(This space for State Use)

APPROVED BY [Signature] TITLE OIL & GAS INSPECTOR DATE 9/22/90

CONDITIONS OF APPROVAL, IF ANY.