

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION

Form C-103
Revised 1-1-89

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

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

API NO. (assigned by OCD on New Wells)

30-025-23252

6. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

N/A

7. Lease Name or Unit Agreement Name

STATE 1-29

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

WELL ☒

GAS

WELL ☐

OTHER

2. Name of Operator

CHEVRON U.S.A. INC.

8. Well No.

6

3. Address of Operator

P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE

9. Pool name or Wildcat
HOBBS BLINEBRY

4. Well Location

Unit Letter P : 330 Feet From The SOUTH Line and 660 Feet From The EAST Line
Section 29 Township 18S Range 38E NMPM LEA County

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

3646' GL

11

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTER CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABAN. ☐

CASING TEST AND CMT JOB ☐

OTHER: PLUG BACK SAME ZONE ☒

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.

WORK STARTED 06/02/94. MIRU, ND WH, NU BOP. SET CIGR @5805', LOAD ANN W/300 BBLs WTR.
MIX & PUMP 225 SX CMT. REV OUT 15 SX, 16 SX IN CSG, 94 SX IN FORM. D/O CMT TO
6310'. PERF AT 6212'-6230' AND 6288'-6292'. SPOT ACID F/6292'-5192'.
SWAB PERFS. ACDZ PERFS W/5000 GALS 15% GELLED ACID. SWAB.
ND BOP, NU WH. TURN WELL OVER TO PRODUCTION 06/14/94.

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

SIGNATURE

TITLE

TECH. ASSISTANT

DATE: 06/16/94

TYPE OR PRINT NAME

WENDI KINGSTON

TELEPHONE NO. (915)687-7436

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUN 20 1994