

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-39

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.
30-025-02387

5. 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

C
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Chevron U.S.A. Inc.

3. Address of Operator

P.O. Box 670, Hobbs, NM 88240

4. Well Location

Unit Letter M : 760 Feet From The South Line and 660 Feet From The West Line

Section 16

Township 19S

Range

34E

NMMPM

Lea

County

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

3777'

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 ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: perf, acdz, rtn to prod. ☒

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 performed: 7-3-89 thru 7-7-89

TD: 13,521 PB: 10,152

POH w/production equipment. Test casing and RBP to 500psi, ok. Spot 230 gallons 15% NEFE (9522-9366). Perf w/4" guns, 180° phased, 1 JHPF, 20 holes at 9500 to 9510'. Acidize perfs f/9500-9510' w/1500 gallons 15% NEFE HCL. Swab. Run production tbg to 10,132'. TAC at 9459'. SN at 10,116'. Run pump equipment. Load and test to 500psi, ok. RDMOPU. Turn over to production dept.

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

SIGNATURE

TITLE Technical Asst.

DATE 7-10-89

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

JUL 12 1989