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LAND OFFICE	
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OIL CONSERVATION DIVISION  
P. O. BOX 2038  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

3a. Indicate Type of Lease  
State ☒ Fee ☐  
3. State Oil & Gas Lease No.  
B-1840

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name State 4-27
Address of Operator P. O. Box 670, Hobbs, NM 88240	9. Well No. 7
Location of Well UNIT LETTER <u>K</u> . 1980 FEET FROM THE <u>South</u> LINE AND <u>2130</u> FEET FROM <u>1780</u> THE <u>West</u> LINE, SECTION <u>27</u> TOWNSHIP <u>17S</u> RANGE <u>35E</u> N.M.P.M.	10. Field and Pool, or WHdcat Vacuum Glorieta
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

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"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
WELL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Fish pkr, acidz, swab test, commingle</u> <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

It is proposed to fish the stuck packer from the wellbore and acidize and swab test the middle and lower Glorieta Paddock perms to determine their productivity. The zones may be commingled depending on the results of the swab testing.

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

M. E. Atkins TITLE Staff Drilling Engineer DATE 11-25-87

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

COPIES OF APPROVAL, IF ANY:

DATE NOV 30 1987

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NOV 25 1987

OCD  
HOBBS OFFICE