STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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# OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

5a. Indicate Type of Lease
State [x] Fee [ ]

5. 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.)

OIL WELL [x] GAS WELL [ ] OTHER-

7. Unit Agreement Name

Name of Operator
Chevron U.S.A. INC.

8. Farm or Lease Name
Lea ED State (NCT-A)

Address of Operator
P.O. Box 670, Hobbs, NM 88240

9. Well No.
4

Location of Well
UNIT LETTER K, 2230 FEET FROM THE South LINE AND 2200 FEET FROM THE West LINE, SECTION 16 TOWNSHIP 19S RANGE 34E NMPM.

10. Field and Pool, or Wildcat
Quail Ridge/Bone Spg

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 [x] | PLUG AND ABANDON [ ] | REMEDIAL WORK [ ] | ALTERING CASING [ ] |
| TEMPORARILY ABANDON [ ] | CHANGE PLANS [ ] | COMMENCE DRILLING OPNS. [ ] | PLUG AND ABANDONMENT [ ] |
| PULL OR ALTER CASING [ ] | | CASING TEST AND CEMENT JOB [ ] | |
| OTHER [ ] | | OTHER [ ] | |

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 recommended to T/A the lower Bone Springs interval and then test the 2nd Bone Springs Sand and the Upper Scharb Bone Springs. Based on Swab test results, zones will be comingled, isolated or TA'd.

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

M. E. Abrams TITLE Staff Drilling Engineer DATE January 26,1988

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: