

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-1587

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Injection</u>	7. Unit Agreement Name
2. Name of Operator	West Pearl Queen Unit
Chevron U.S.A. Inc.	8. Farm or Lease Name
3. Address of Operator	
P.O. Box 670 Hobbs, NM 88240	9. Well No.
4. Location of Well	129
UNIT LETTER <u>N</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM	10. Field and Pool, or WHdcat
THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>19S</u> RANGE <u>35E</u> NMPM.	Pearl Queen
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
3741 GE	Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Temporary Abandon Well ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

MIRU PU. POH with packer and tubing. TIH with new packer and tubing test tubing to 3000 psi. Set packer at 4665' and 4624' and unsuccessfully try to test back side, casing leak from 3756'-4665'. POH with packer. Decided to temporary abandon well and was approved by Jerry Sexton. RU WLU, set CIBP at 4700' and 3650' and dump 40 sacks of cement on each. Test casing to 500 psi for 30 minutes. POH with tubing, cleaned and cleared location.

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

SIGNED MW Casey TITLE Division Proration Engineer

DATE 3/4/86

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR

TITLE

DATE MAR 6 - 1986

CONDITIONS OF APPROVAL, IF ANY:

TH 4-4-86 3/7/87

