

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
State ☒ 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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Water Injector	7. Unit Agreement Name West Pearl Queen Unit
2. Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name
3. Address of Operator P.O. Box 670 Hobbs, NM 88240	9. Well No. <del>170</del> 150
4. Location of Well UNIT LETTER F 1980 North 1980 FEET FROM THE LINE AND FEET FROM West 32 19S 35E THE LINE, SECTION TOWNSHIP RANGE NMPM.	10. Field and Pool, or Wildcat Pearl Queen
15. Elevation (Show whether DF, RT, GR, etc.) 3719 GL	12. County Lea

16. 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"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Isolate and Repair Casing Leak <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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 1503.

POH with tubing. TIH with packer and RBP. Isolate casing leak. Cement as necessary. Drillout cement. TIH with tubing. Test casing and packer to 500 psi for 30 minutes. Return to injection.

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

SIGNED P. H. Bullock Jr.

TITLE Division Drilling Manager DATE 2-7-1986

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

TITLE \_\_\_\_\_

DATE FEB 11 1986

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED  
FEB 10 1986  
OFFICE  
HOBBS OFFICE