

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer Dd, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells) 30-025-04251	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. 2581	
7. Lease Name or Unit Agreement Name R. R. BELL (NCT-G)	
8. Well No. 1	
9. Pool name or Wildcat EUMONT; YATES-7 RVRG-QUEEN (PRO GAS)	

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:
OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. Name of Operator
CHEVRON U.S.A. INC.

3. Address of Operator
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON

4. Well Location
Unit Letter **P** : **660** Feet From The **SOUTH** Line and
Section **13** Township **20S** Range **36E** **660** Feet From The **EAST** Line
County **LEA**

10. Elevation(Show whether DF, RKB, RT, GR, etc.)
3550'

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 ☒ ALTER CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABAN. ☐
CASING TEST AND CMT JOB ☐
OTHER: ☐

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.

MIRU 11/8/95. FRAC PERFS 3350'-3516' W/62,000 GALS 50Q LINEAR GEL
& 228,000 LBS 12/20 BRADY SD. PERF F/3266'-3074'. ACDZ NEW PERFS W/
150 GALS EACH 15% NEFE HCL.FRAC NEW PERFS W/55,000 GALS 50Q LINEAR GEL
& 200,500 LBS 12/20 BRADY SD. RIH W/2 3/8" TBG TO 2985.
TURN WELL OVER TO PRODUCTION 11/17/95.

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

SIGNATURE Wendi Kingston TITLE **TECH. ASSISTANT**

DATE: **12/13/95**

TYPE OR PRINT NAME **WENDI KINGSTON**

TELEPHONE NO. **(915)687-7826**

APPROVED BY JERRY SEXTON TITLE **DEPUTY DIRECTOR**

DATE

DEC 18 1995

CONDITIONS OF APPROVAL, IF ANY:

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