

CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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 <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator			8. Farm or Lease Name
Chevron U.S.A. Inc.			B. V. Culp (NCT-A)
Address of Operator			9. Well No.
P.O. Box 670, Hobbs, New Mexico 88240			5
Location of Well			10. Field and Pool, or Wildcat
UNIT LETTER <u>H</u> 1980 FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM			Eunice Monument
THE <u>East</u> LINE, SECTION <u>19</u> TOWNSHIP <u>19S</u> RANGE <u>37E</u> N.M.P.M.			
15. Elevation (Show whether DF, RT, GR, etc.)			12. County
3673' GL			Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

REFORM 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 OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
REPAIR OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <u>Inspected cellar</u> <input checked="" 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.

The cellar was dug out and casing valves repiped to the surface. It was inspected by Jack Griffin with OCD 6/16/86.

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

BY Mr. Casey TITLE Division Proration Engineer DATE 6/18/86

BY Jack Griffin TITLE OIL & GAS INSPECTOR DATE JUN 27 1986

NOTES ON APPROVAL, IF ANY: