State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-05715
5. Indicate Type of Lease   STATE ☒   FEE ☐
6. 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.)

7. Lease Name or Unit Agreement Name

F. W. KUTTER (NCT-B)

1. Type of Well:
OIL WELL ☐   GAS WELL ☐   OTHER

8. Well No. 4

2. Name of Operator
Chevron U.S.A. Inc.

3. Address of Operator
P.O. Box 1150, Midland, TX 79702

9. Pool name or Wildcat
EUNICE MONUMENT;GRAYBURG-SAN ANDRES

4. Well Location
Unit Letter F : 1980 Feet From The NORTH Line and 1650 Feet From The WEST Line

Section 28 Township 19S Range 37E NMPM LEA County

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

11.   **Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	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: _____	☐

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.

TAG CR @ 3900'. SET CIBP @ 3594'. SET BALANCED PLUG 3585'-3365'. SET BALANCED PLUG 2894'-2794'. SET BALANCED PLUG 2625'-2525'. SET BALANCED PLUG 1344'-1244'. SET BALANCED PLUG 100' - SURF. CUT OFF WH, SET P&A MARKER.

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

SIGNATURE J. K. Ripley   TITLE TECHNICAL ASSISTANT   DATE 3/29/99

TYPE OR PRINT NAME J. K. RIPLEY   TELEPHONE NO. (915)687-7148

(This space for State Use)

APPROVED BY_____   TITLE_____   DATE_____

CONDITIONS OF APPROVAL, IF ANY: