Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-24082

5. Indicate Type of Lease STATE [X] 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
Graham State (NCT-G)

1. Type of Well: OIL WELL [X] GAS WELL [ ] OTHER

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

8. Well No.
4

3. Address of Operator
P.O. Box 670, Hobbs, NM 88240

9. Pool name or Wildcat
Eunice Monument Grayburg SA

4. Well Location
Unit Letter I : 1650 Feet From The South Line and 990 Feet From The East Line

Section 17 Township 19S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3677' GL

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: Add perfs in Grayburg & acdz [X]	

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 PU, POH W/RODS & TBG
MIRU WL CO. PERF GRAYBURG @ 3990-4000 & 3816-25 W/2JHPF @ 90 DEG (TTL 38 HOLES)
ACDZ 3990-4000 W/1050 GAL 15% NEFE HCL 20 RCNBS NO BALL ACTION
ACDZ 3816-25 W/1100 GAL 15% NEFE HCL 20 RCNBS GOOD BALL ACTION
SWAB SFL-2600 EFL-3550 RECOV 6BLW
ACDZ GRAYBURG(3816-4000) PMP 400 GALS 10# XL BW W/400# GRS & 150# BAF BLOCK + 750 GALS 15% NEFE HCL ACID + 250 GALS 10# XL BW W/200# GRS & 100# BAF + 750 GALS 15% NEFE HCL ACID + 350 GALS W/400# GRS & 170# BAF BLOCK + 750 GALS 15% NEFE HCL ACID
SWAB SFL-1100 EFL-3500 REC TR-OIL 41 BW
RIH TO 4000 NO FILL TOH
TIH W/P.T. TSTG 5000 PSI A.S. OK RUN P.E. TST PMP ACTION OK
TURN WELL OVER TO PROD.

WORK STARTED 7-30-90 WORK ENDED 8-5-90

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

SIGNATURE M. E. Akins 8/14/90 TITLE Staff Drlg. Engr. DATE 8-15-90

TYPE OR PRINT NAME M. E. Akins TELEPHONE NO. 393-4121

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: