

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Chevron U.S.A. Inc.		8. Farm or Lease Name Eunice King
3. Address of Operator P.O. Box 670, Hobbs, NM 88240		9. Well No. 7
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>28</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> N.M.P.M.		10. Field and Pool, or Wildcat Paddock
15. Elevation (Show whether DF, RT, GR, etc.) 3447' GL		12. County Lea

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 checked="" 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"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input 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 1103.

POH w/production equipment.  
Perf 5077-5072-5066 Acidize w/8000 gallons NEFE HCL in 8 equal stages. RIH  
w/production equipment. Return to production. Work performed 3-30-87 to 4-06-87.

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

SIGNED M. E. Abbin TITLE DRILLING STAFF ENGINEER DATE MAY 19, 1987  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR  
APPROVED BY \_\_\_\_\_ DATE MAY 26 1987  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

RECEIVED  
MAY 22 1987  
OCD  
HOBBS OFFICE