

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**

Form C-103  
Revised 1-1-89

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

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 OCC on New Wells) 30-025-06864	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. N/A	
7. Lease Name or Unit Agreement Name EUNICE KING	
8. Well No. 24	
9. Pool name or Wildcat PENROSE SKELLY/SAN ANDRES	

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER WATER DISPOSAL	
2. Name of Operator CHEVRON U.S.A. INC.	
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE	
4. Well Location Unit Letter <u>E</u> : <u>2086</u> Feet From The <u>NORTH</u> Line and Section <u>28</u> Township <u>21 SOUTH</u> Range <u>37E</u> NMPM <u>LEA</u> County	
10. Elevation(Show whether OF, RKB, RT, GR, etc.) 3470' GL	

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CMT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: PLUG BACK & CONVERT TO WATER DISPOSAL <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>

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.

WORK STARTED 10/12/93. MIRU PU. BLEED WELL DN, ND WH, NU BOP. SET CIBP @5490'.  
DUMP 3 SX CMT ON CIBP. SET CIBP @5070', DUMP 3 SX CMT ON TOP. RD PU ON 10/13/93.  
MIRU PU ON 04/06/94. ND WH, NU BOP. LOG F/4000'-4600'. PERF W/4 JHPF F/4150'-4500'.  
ACDZ PERFS W/2500 GALS HCL 15% NEFE. FLUSH. SET PKR @4092'.  
ND BOP, NU WH, RD PU. TURN WELL OVER TO PRODUCTION 04/08/94.

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: 04/12/94

TYPE OR PRINT NAME WENDI KINGSTON TELEPHONE NO. (915)687-7436

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT MANAGER DATE APR 14 1994

CONDITIONS OF APPROVAL, IF ANY:

TC

20 Blue Hwy

dp