

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injector		7. Unit Agreement Name Central Drinkard Unit
2. Name of Operator Chevron U.S.A. INC.		8. Farm or Lease Name
3. Address of Operator P.O. Box 670 Hobbs, NM 88240		9. Well No. 164
4. Location of Well UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM West 29 TOWNSHIP 21S RANGE 37E NMPM.		10. Field and Pool, or Wildcat Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3472 GL		12. County Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Repair casing leaks

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.

Found casing leak 5573-5875 (old perfs). Cemented with 65 sacks class "C" 12% FLA 1.5% CACL2. Drilled out cement. Tested casing to 500 psi. TIH with production tubing, tested to 5000psi, and packer. Tested casing and packer to 600psi. Return well to injection. Chart attached.

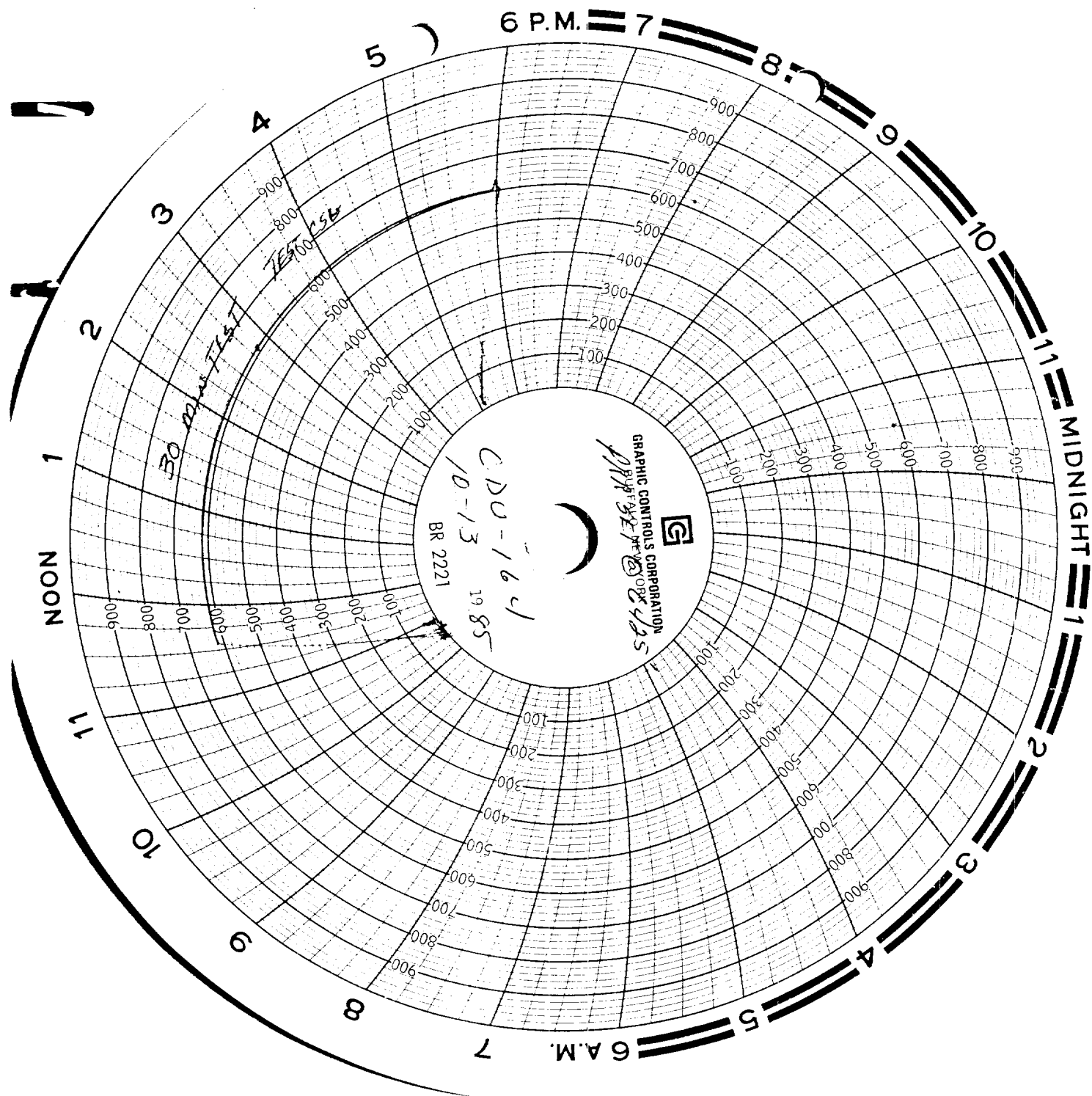
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED P H Buley Jr TITLE Division Drilling Manager DATE 10-23-1985

ORIGINAL SIGNED BY SUPERVISOR

APPROVED BY DISTRICT SUPERVISOR TITLE DATE OCT 25 1985

CONDITIONS OF APPROVAL, IF ANY:



RECEIVED

OCT 24 1985

O.D.
MOBBS OFFICE