Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Perals and Natural Resources Department

Form C-103 Revised 1-1-89 ì

DISTRICTI P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

30-025-06901 5. Indicate Type of Lease

WELL API NO.

חוכדפוכיו ווו	STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	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
I. Type of Weil: OIL GAS WELL XX WELL OTHER	H. T. MATTERN NCT-B
2. Name of Operator Chevron U.S.A. Inc.	8. 4Weil No.
P.O. Box 670, Hobbs, NM 88240	9. Pool name or Wildcat Penrose Skelly - GB
Unit Letter P: 330 Feet From The East Line and	330 Feet From The South Line
Section 30 Township 21S 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:	JBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILL	ING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND	CEMENT JOB
OTHER: OTHER:	out/acidize/frac
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, in work) SEE RULE 1103.	cluding estimated date of starting any proposed
Work perforemd: 5-15-89 thru 5-19-89 TD: 3800 P	B: 3780
POH w/production equipment. Acidize open hole f/3519' to 3 15% NEFE HLC. Flush to bottom of open hole w/26bbls CKF. w/35,500# 20/40 ottawa sand. Swab. Circulate clean. TIH Ran pump and rods. Space out, hang on. Test pump seat and 500psi, ok. Turn over to production.	Swab. Frac open hole w/ 2 3/8" tbg to 3763'.
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. Technical	Assistant 5-22-89

(This space for State Use)

SIGNATURE (

TYPE OR PRINT NAME

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

TILE .

MAY 2 5 1989

DATE -

TELEPHONE NO.

APPROVED BY -

DATE -

MALL YES

MAY 24 1989

OCD Hobbs office