

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 0d, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

SUNDRY NOTICES AND REPORTS ON WELLS (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.)		API NO. (assigned by OCD on New Wells) 30-025-06970
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CHEVRON U.S.A. INC.		6. State Oil & Gas Lease No. N/A
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE		7. Lease Name or Unit Agreement Name J. N. CARSON (NCT-C)
4. Well Location Unit Letter A : 460 Feet From The NORTH Line and 635 Feet From The EAST Line Section 33 Township 21 SOUTH Range 37E NMPM LEA County		8. Well No. 2
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3447' GL		9. Pool name or Wildcat BLINEBRY OIL & GAS

11 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"/> ALTER CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABAN. <input type="checkbox"/> CASING TEST AND CMT JOB <input type="checkbox"/> OTHER: PLUG BACK NEW ZONE <input checked="" 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 03/25/94. MIRU PU. POH W/TBG. SET CIBP @6300' W/10' CMT ON TOP.
TEST CSG TO 500# OK. PERF W/2 JHPF F/5464'-5955'. ACDZ PERFS W/4000 GALS 15% NEFE HCL.
FRAC PERFS W/75,000 GALS 35# X-LINED GEL W/50% CO2 AND 175,000# OF 16/30 SD.
FLUSH. ND BOP, NU WH. RD PU.
TURN WELL OVER TO PRODUCTION 04/06/94.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE <u>Wendi Kingston</u>	TITLE TECH. ASSISTANT	DATE: 04/12/94
TYPE OR PRINT NAME WENDI KINGSTON		TELEPHONE NO. (915)687-7436
APPROVED BY <u>Jerry Sexton</u>		DATE APR 14 1994
CONDITIONS OF APPROVAL, IF ANY:		TITLE DISTRICT I SUPERVISOR

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