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State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

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 OCD on New Wells)	30-025-06989
6. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
8. State Oil & Gas Lease No.	N/A
7. Lease Name or Unit Agreement Name	CENTRAL DRINKARD UNIT
8. Well No.	157
9. Pool name or Wildcat	DRINKARD
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3436'GR

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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	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>P</u> : <u>660</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line Section <u>33</u> Township <u>21S</u> Range <u>37E</u> NMPM <u>LEA</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3436'GR	

11 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 checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> ALTER CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABAN. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CMT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <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.

WE PROPOSE TO:

PLUG #1, SET CIBP @ 6500', W/25 SX CMT ON TOP. (COVERS 5" SHOE)
PLUG #2, 35 SX CMT F/5020-6020' (COVERS GLORIETTA)
PLUG #3, PERF 5" CSG @ 3650, SQZ W/50 SX CMT. (COVERS 7" SHOE)
PLUG #4, PERF @ 1250', SQZ W/65 SX PLUG 1150-1300' (COVERS SALT ZONE)
CIRCULATE TO SURFACE.
SET 10 SX SURFACE P;LUG
PLACE 9.5 PPG MUD BETWEEN ALL PLUGS.
PULL DEAD MAN ANCHORS, FILL PITS, LEVEL LOCATION, PLACE P&A MARKER
AND CHANGE STATUS OF WELL TO PLUGGED AND ABANDONED.

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

SIGNATURE Nita Rice TITLE TECHNICAL ASSISTANT DATE: 8/9/93

TYPE OR PRINT NAME NITA RICE TELEPHONE NO. (915)687-7436

APPROVED BY Paul Kautz TITLE Geologist DATE AUG 16 1993

CONDITIONS OF APPROVAL, IF ANY

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

Lease CDU Well No. 157 Pool Drinkard
 Location 660 FSL 660 FEL, Sec 33-21S-37E County Lea State NM

GI: 3436

KB: 3449
 H: 13

Spud date: _____

958 MOD 40 # Grade NA
 Set @ 1223' w/ 275sx
 Top of Cnt @ NA'
 By:

Zone	Comp. Date	Aband. Date

7 MOD 24 # Grade NA
 Set @ 3617' w/ 250sx
 Top of Cnt @ NA'
 By:

Treatment History (Current Zone)
 (10-14-47) Perf'd 6530-6565
 + acidized w/ 1000 gal MHA (Szed.)
 (10-19-47) Perf'd 6540-6565
 acidized w/ 2000 gal acid
 (10-22-47) Perf'd 6575-6590.
 Acidized w/ 1000 gal
 (10-23-47) Acidized 6575-6590
 w/ 2000 gal 20% low ten. acid
 (10-24-47) Acidized 6575-6590
 w/ 4000 gal 20% low ten. acid
 (10-28-47) Acidized 6575-6590
 w/ 4000 gal 20% low ten. acid
 (12-12-75) Acidized 6540-
 6590 w/ 1000 gal 15% HCL
 (11-17-76) Pump

1-2 3/8" x 4' + 1-2 3/8" x
 6' - 4.70" EUE BROJ-55
 Tbg subs, 211 jts
 ditto tbg, 2 3/8" SN
 @ 6535, 1-2 3/8" x 3'
 Perf. Nipple, 1 jt
 ditto tbg BPOB
 Btm tbg 6571

Producing History (Current Zone)

Month/Year	Oil	Water	Gas

Remarks and Recommendation:

Mobil H. Corrigan #2

Last Test Dated:

NOPI BNPD HCFOPI

Cum. Oil Cum. Gas

Prepared By: L.B. Ivankoe

Date: 6-1-79

PB 6571
 TD 6600

5 MOD 15 # Grade J-55
 Set @ 6600' w/ 250sx
 Top of Cnt @ 3100'
 By: Calc.

15-65
 14

Dik
 6540-65 4JHPF
 6575-90 4JHPF

LVT
 11/92

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-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
CHEVRON U.S.A. INC.
Address
P. O. Box 670, Hobbs, NM 88240
Reason(s) for filing (Check proper box)
☐ New Well ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☒ Change in Ownership ☐ Casinghead Gas ☐ Condensate
Other (Please explain)
Name Change Effective 7-1-85

If change of ownership give name and address of previous owner
Gulf Oil Corp., P. O. Box 670, Hobbs, NM 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name Central Drinkard Unit 157	Well No. 157	Pool Name, including Formation Drinkard	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>P</u> : <u>6660</u> Feet From The <u>South</u> Line and <u>6660</u> Feet From The <u>East</u> Line of Section <u>33</u> Township <u>21S</u> Range <u>37E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 2538 Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Tetaco Producing, Inc. Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) Box 300 Tulsa, OK 74102 Box 1589 Tulsa, OK 74100
If well produces oil or liquids, give location of tanks. Unit <u>L</u> Sec. <u>33</u> Twp. <u>21S</u> Rge. <u>37E</u>	Is gas actually connected? <u>yes</u> When <u>Unknown</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

R.D. Pitzer
(Signature)

Area Engineer
(Title)

5-31-85
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 1 1985, 19
BY James A. Sutton
TITLE DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filled for each pool in multiply completed wells.

RECEIVED

JUL 30 1985

U.S. DEPT. OF JUSTICE
HOMES OFFICE