Submit 3 Copies

2 State of New Mexico to Appropriate Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office	OIL CONSERVA	ATION DIVISION				
0.070.07	P.O. Bo					
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	Santa Fe, Nev	w Mexico 87504-2088				
DISTRICT II			ADI NO. (see			
P.O. Drawer Dd, Artesia, NM 88210				API NO. (assigned by OCD on New Wells) 30-025-06993		
DISTRICT III				of Lease		
1000 Rio Brazos Rd., Aztec, Nm 87410				STATE	FEE X	
			6. State Oil & C	Gas Lease No.		
			N/A			
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"				7. Lesse Name or Unit Agreement Name		
(FORM C-101) FOR SUCH PROPOSALS.)				CENTRAL DRINKARD UNIT		
1. Type of Well:				MINICALID CIVIT		
OIL GAS					-	
WELL X WELL	OTHER					
2. Name of Operator			8. Well No.	8. Well No.		
CHEVRON U.S.A. INC.  3. Address of Operator				156		
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE				9. Pool name or Wildcat DRINKARD		
4. Well Location			DNIVKAND			
Unit Letter O	: 589 Feet From The	SOUTH Line and	1909	Feet From The E	AST Line	
Section 33		21S Range		NMPM LEA	County	
	10. Elevation(	Show whether DF, RKB, RT, GR, etc.	1			
11 Check	Approprieto Roy to Indocata A	3456' GR				
NOTICE OF INTENTI		ature of Notice, Report, or Oth SUBSEQUENT				
		EMEDIAL WORK	7	ALTER CASING		
TEMPORARILY ABANDON CHANG	🛏 🗎	OMMENCE DRILLING OPNS.	₹			
PULL OR ALTER CASING		ASING TEST AND CMT JOB	┥ '	PLUG AND ABAN.	X	
OTHER:	<del></del> 1	THER:	J			
				<del></del>		
12. Describe Proposed or Completeo Operati	ons(Clearly state all pertinent details	s, and give pertinent dates, including				
esticated date of starting any proposed we	ork) SEE RULE 1103.					
WORK PERFORMED 1-7 THRU 1-11-94						
PLUG #1, SET CIBP @ 6500', W/25 SX CMT ON TOP. (COVERS 5-1/2" SHOE)						
PLUG #2, 35 SX CMT F/4900-5320' (COVERS GLORIETTA)						
PLUG #3, PERF 5-1/2" CSG @ 3850, SQZ W/50 SX CMT. (COVERS 8-5/8" SHOE)						
PLUG #4, PERF @ 250', SQZ W/65 SX PLUG 1150-1300' (COVERS SALT ZONE)						
CIRCULATE TO SUR	FACE.					
PLUG #5, PERF @ 2	50', SQZ 100 SX PLUG	350-SURFACE (COVERS	S 13-3/8" SH	IOE)		
PLACE 9.5 PPG MUI	BETWEEN ALL PLUGS					
PULL DEAD MAN AN	ICHORS, FILL PITS, LEV	EL LOCATION, PLACE P	&A MARKER			
	F WELL TO PLUGGED A					
I hereby certify that the information above is tr	ue and complete to the best of my (	cnowledge and belief	<del></del>	<del></del>		
SIGNITURE Auta	$\sim$	ECHNICAL ASSISTANT	DATE:	1/12/04		
	THE T	ECHNICAL ASSISTANT	DATE:	1/12/94	<del></del>	
TYPE OR PRINT NAME NITA	RICE		TELEPHONE NO. (	915)687-7436		
1 1 1	)					
APPROVED BY Charles	Elow TITLE OF		DATE			
CONDITIONS OF APPROVAL, IF ANY:	THE THE	·	DATE	FEB 1 5 199	4	