

Submit 3 Copies

to Appropriate

District Office

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)	
30-025-08731	
5. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
N/A	
7. Lease Name or Unit Agreement Name	
ARROWHEAD GRAYBURG UNIT	
8. Well No.	
147	
9. Pool name or Wildcat	
ARROWHEAD GRAYBURG	

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. Type of Well:	
OIL	GAS
WELL <input checked="" type="checkbox"/>	WELL <input type="checkbox"/> OTHER
2. Name of Operator	
CHEVRON U.S.A. INC.	
3. Address of Operator	
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS	
4. Well Location	
Unit Letter	Section
B	1
660 Feet From The	Township
NORTH	22S
Line and	Range
1980	36E
Feet From The	NMPM
EAST	LEA
Line	County
10. Elevation(Show whether DF, RKB, RT, GR, etc.)	
3501 GE	

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:	DEEPEN, LOG, RUN LINER, PERF, ACDZ.		<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.

POOH W/ PROD. EQUIP. TST/CSG-LEAKED OFF.
DRLG FROM 3788'-3880' W/ 6 1/2" BIT.
RUN 4 1/2" LINER FROM 0'-3880'. 11.60#,K-55.
CMT W/ 1075 SXS. TOC @ 2200'.
PERF 3872-3696 W/15 HOLES.
ACDZ PERFS 3670-3876 W/2000 GALS 15% NEFE.
RETURN TO PRODUCTION.
WORK STARTED 9-22-91 WORK ENDED 10-03-91.

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

SIGNATURE	<u>P.R. Matthews</u>	TITLE	TECH. ASSISTANT	DATE:	10-08-91
TYPE OR PRINT NAME	P.R. MATTHEWS	TELEPHONE NO.	(915)687-7812		
APPROVED BY	<u>[Signature]</u>	TITLE		DATE	
CONDITIONS OF APPROVAL, IF ANY:					