2

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

to Appropriate District Office

CONDITIONS OF APPROVAL, IF AND

## **OIL CONSERVATION DIVISION**

P.O. Box 2088	
DISTRICT I Santa Fe, New Mexico 87504-2088	
P.O. Box 1980, Hobbs, NM 88240	
<u>DISTRICT II</u>	API NO. (assigned by OCD on New Wells)
P.O. Drawer Dd, Artesia, NM B8210	30-025-08739
DISTRICT III	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, Nm 87410	STATE X FEE
	8. State Oil & 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	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	ADDOM/UTAD CDAVDUDG UNIT
(FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well:	ARROWHEAD GRAYBURG UNIT
OIL GAS	
WELL X WELL OTHER CONVERT TO WATER INJECTO	Ŕ
2. Name of Operator	B. Well No.
CHEVRON U.S.A. INC.	169
3. Address of Operator	9. Pool name or Wildcat
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE	ARROWHEAD/GB
4. Well Location Unit Letter I 1980 Feet From The SOUTH Line and	660 Feet From The EAST Line
336	36E NMPM LEA County
Section Z Township ZZS Range  10. Elevation(Show whether DF, RKB, RT, GR, etc.	
3530' GR	
11 Check Appropriate Box to Indecate Nature of Notice, Report, or Oth	er Data
NOTICE OF INTENTION TO: SUBSEQUENT	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTER CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABAN.
PULL OR ALTER CASING CASING TEST AND CMT JOB	<u> </u>
OTHER: CONVERT TO WTR INJ X OTHER:	·
12. Describe Proposed or Completed Operations/Clearly state all pertinent details, and give pertinent dates, including	
esticated date of starting any proposed work) SEE RULE 1103.	
WE PROPOSE TO:	
POH W/RODS & PMP, ND WH, NU BOP. TST CSG TO 500 PSI F/30	
CASING LEAK IF NECESSARY. FISH MUD ANCHOR JOINT. DEEPEN	WELL 75' TO 3915'. CIRC
CLEAN. PERF 3715-3730', 22 HOLES, 2 JHPF. ACDZ PERFS 3715	-3839 W/2300 GALS 15% NEFE HCL.
SWAB BACK LOAD. CLEAN OUT TO PBTD, CIRC CLEAN. RUN 2-3	/8 DUOLINE FIBERGLASS TBG
& SET 5-1/2 INJECTION PKR @3650'. TST ANNULUS TO 300 PSI	=/30 MINS.
PLACE WELL ON INJECTION.	
A CONTRACTOR OF THE PARTY OF TH	
Thereby certify that the information above is true and complete to the best of my knowledge and belief.	DATE: 3/30/93
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNITURE  TITLE TECHNICAL ASSISTANT	DATE: 3/30/93
SIGNITURE TECHNICAL ASSISTANT	DATE: 3/30/93 TELEPHONE NO. (915)687-7436
SIGNITURE TITLE TECHNICAL ASSISTANT  TYPE OR PRINT NAME NITA RICE	TELEPHONE NO. (915)687-7436
SIGNITURE TECHNICAL ASSISTANT	

RECEIVED

APR 01 1990

OCD MARK STORE