Submit 3 Copies to Appropriate

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

Form C-103 Revisied 1-1-89

District Office OIL CONSERVATION DIVISION	
P.O. Box 2088	
DISTRICT : Santa Fe, New Mexico 87504-2088	
P.O. Box 1980, Hobbs, NM 88240	
DISTRICT II	API NO. (assigned by OCD on New Wells)
P.O. Drawer Dd, Artesia, NM 88210	
DISTRICT III 1000 Rio Brazos Rd., Aztec, Nm 87410	5. Indicate Type of Lesse STATE X FEE
	6. State Oil & Gas Lease No.
	B-08744
SUNDRY NOTICES AND REPORTS ON WELLS	
IDO 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"	OXY STATE 'N"
(FORM C-101) FOR SUCH PROPOSALS.)	1
1. Type of Well:	
well Some Plugged	
2. Name of Operator	8. Well No.
CHEVRON U.S.A. INC.	2
3. Address of Operator	9. Pool name or Wildcat
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS	ARROWHEAD/GB
4. Well Location Unit Letter K: 2310 Feet From The SOUTH Line and	2310 Feet From The WEST Line
Section 2 Township 22S Range	36E NMPM LEA County
10. Elevation(Show whether DF, RKB, RT, GR, etc.	
11 Check Appropriate Box to Indecate Nature of Notice, Report, or Other	
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	
OTHER: NAME CHANGE 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.	
CHEVRON WISHES TO CHANGE THE NAME OF THE AGU #171 BA	CK TO THE FORMER NAME:
<del></del>	CK TO THE TOMMENTAME.
FORMER NAME: OXY STATE "N" #2.	
THE PARTY OF THE P	TO DARTED CACINIC
REASON: THE OXY STATE "N" # 2 WELLBORE IS UNUSABLE DUE	
IT IS OUR INTENTION TO DRILL A NEW WELL AND CALL IT THE A	GU#1/1.
I hereby certify that the information above to true and complete to the best of my knowledge and belief.	
SIGNITURE R. MUSCLEW TITLE TECH. ASSISTANT	DATE: 9-16-92
TYPE OR PRINT NAME P.R. MATTHEWS	TELEPHONE NO. (915)687-7812
CHICINIAL MICHER ST. JERRY SENTON	
~	DATE SEP 1.6 192
APPROVED BY THE CONDITIONS OF APPROVAL, IF ANY:	

N. Ow David Trees

9-17-92 &

RECEIVED
SEP \$\frac{1992}{2}\$