

Submit 3 Copies
to Appropriate
District Office

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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

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|---|
| API NO. (assigned by OCD on New Wells) |
| 30-025-08745 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. N/A |
| 7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT |
| 8. Well No. 175 |
| 9. Pool name or Wildcat ARROWHEAD/GB |
| 10. Elevation(Show whether CF, RKB, RT, GR, etc.) 3525' GL |

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.)

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| 1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTOR |
| 2. Name of Operator CHEVRON U.S.A. INC. |
| 3. Address of Operator (915) 687-7436 P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE |
| 4. Well Location Unit Letter <u>O</u> : <u>660</u> Feet From The <u>SOUTH</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line Section <u>2</u> Township <u>22S</u> Range <u>36E</u> NMPM <u>LEA</u> County |
| 10. Elevation(Show whether CF, RKB, RT, GR, etc.) 3525' GL |

| | |
|--|---|
| 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"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | CASING TEST AND CMT JOB <input type="checkbox"/> |
| OTHER: <input type="checkbox"/> | OTHER: <u>DEEPEN, ACDZ,</u> <input checked="" type="checkbox"/> |
| | <u>& CONVERT TO WTR INJ</u> <u>R-9483</u> |

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.

WORK PERFORMED 4-13 THRU 4-26-93
MIRU, POH & LD RODS & PMP. ND WH. NU BOP. POH & LD PROD TBG.
DEEPEN WELL 104' F/3872 TO 3976', CIRC. RIH & SET PKR @ 3680, LOAD
CSG, ACDZ W/2100 GALS 15% NEFE HCL. SWB. RUN PLASTIC COATED PACKER
ON FG LINED INJ TBG, SET PKR AT 3690', CIRC PKR FLUID. ND BOP. NU WH. TST ANNULUS
TO 360 PSI F/30 MINS. PLACE WELL ON INJECTION,
(WELL FORMERLY CONOCO STATE "J-2" #6 WELL)

3742-3976 Log Interval

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: 4/28/93

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

APPROVED BY [Signature] TITLE [Signature] DATE APR 30 1993
CONDITIONS OF APPROVAL, IF ANY: