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

bistrict office	
P.O. Box 2088	
DISTRICT I 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	30-025-08748
DISTRICT III	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, Nm 87410	STATE X FEE
	6. 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"	
(FORM C-101) FOR SUCH PROPOSALS.)	ARROWHEAD GRAYBURG UNIT
1. Type of Well: OIL GAS	
WELL X WELL OTHER	
2. Name of Operator	B. Well No.
CHEVRON U.S.A. INC.	156
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 G: 1990 Feet From The NORTH Line and	1980 Feet From The EAST Line
Voit Letter G : 1990 Feet From The NORTH Line and Section 2 Township 22S Range	36E NMPM LEA County
10. Elevation(Show whether DF, RKB, RT, GR, etc.	
3549' GE	
11 Check Appropriate Box to Indecate Nature of Notice, Report, or Oth	er Data
NOTICE OF INTENTION TO: SUBSEQUENT	REPORT OF:
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: CONVERT TO WATER INJECTO X OTHER:	
6-9483	
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 PROPOSES TO: MIRU, NU BOPE	
RUN 5-1/3 X 2-3/8 PLASTIC COATED INJECTION PACKER, 2-3/8 L	NED
INJECTION TUBING. SET PACKER @ 3680', CIRCULATE PACKER F	
ND BOP, NU WELLHEAD, TEST ANNULUS TO 300 PSI FOR 30 MIN	OTES,
PLACE WELL ON WATER INJECTION.	
4	
I hereby certify that the information above is you and complete to the best of my knowledge and belief.	
SIGNITURE ALLA TILE TECHNICAL ASSISTANT	DATE: 11/19/92
TYPE OR PRINT NAME NITA RICE	TELEPHONE NO. (915)687-7436
Twig. Signed by	(200 NONE NO. 10 10/007 7 700
<b>Post Kauc</b>	26, 8 3 AON
APPROVED BY GOOLOGIST TITLE	DATE 100 0 11 9/
CONDITIONS OF APPROVAL IF ANY:	

CONDITIONS OF APPROVAL, IF ANY: