

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) <b>30-025-08756</b>	
6. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. <b>B-1732</b>	
7. Lease Name or Unit Agreement Name <b>HARRY LEONARD (NCT-D)</b>	
8. Well No. <b>6</b>	
9. Pool name or Wildcat <b>EUNICE SOUTH SR-QUEEN</b>	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) <b>3579 GE</b>	

**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.)

1. Type of Well: OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> WELL <input checked="" type="checkbox"/> WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator <b>CHEVRON U.S.A. INC.</b>	
3. Address of Operator <b>P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE</b>	
4. Well Location Unit Letter <b>L</b> : <b>1980</b> Feet From The <b>SOUTH</b> Line and <b>660</b> Feet From The <b>WEST</b> Line Section <b>3</b> Township <b>22S</b> Range <b>36E</b> NMPM <b>LEA</b> County	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) <b>3579 GE</b>	

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	
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"/>	
<b>SUBSEQUENT REPORT OF:</b>	
REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABAN. <input checked="" type="checkbox"/>
CASING TEST AND CMT JOB <input type="checkbox"/>	
OTHER: <input 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.

WORK PERFORMED 9-28 THRU 9-30-92  
TIH AND SET CIBP AT 3700', LOAD AND TEST ANN., CAP CIBP WITH 35' CMT. (3700-3665)  
SET BALANCED PLUG F/3420-3100 W/35 SX. CMT., COVERS YATES AND 7-RIVERS PAY.  
SET BALANCED PLUG F/1730-1490 (25 SXS. ), COVERS RUSTLER & TOP OF SALT.  
SHOOT HOLES AT 450', BREAK CIRC BETWEEN 5-1/2" & 8 5/8" CSG., CMT W/115 SXS.  
LEAVE CASING FULL OF CEMENT.  
CUT OFF WELLHEAD AND INSTALL P & A MARKER.  
10# P & A MUD PLACED BETWEEN ALL CMT. PLUGS.  
CHANGE WELL STATUS TO P & A.

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: 10/19/92  
TYPE OR PRINT NAME NITA RICE TELEPHONE NO. (915)687-7436

APPROVED BY [Signature] TITLE Oil Conservation Division DATE DEC 28 '92  
CONDITIONS OF APPROVAL, IF ANY: