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to Appropriate

State of New Mexico

Form C-103 Revised 1-1-89

Energy, Minerals and Natural Resources Department OIL CONSERVATION DIVISION

Soul Goo Bopartinon	
MOISIVIA	

District Utilice	OIL COMOLIN	A 1101 DITIOIS			
	P.O. B	ox 2088			
DISTRICT I	Santa Fe, Ne	w Mexico 87504-2088			
P.O. Box 1980, Hobbs, NM 88240					
DISTRICT II			API NO. (assigned by OCD on New Wells) 30-025-08782 5. Indicate Type of Lease STATE X FEE		
P.O. Drawer Dd, Artesia, NM 88210					
DISTRICT III 1000 Rio Brazos Rd., Aztec, Nm 87410					
			B-229-1		
SUNDRY NOTICES AND REPORTS ON WELLS					
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DIFFERENT RESERVOIR. USE "APPLICAT				
	(FORM C-101) FOR SUCH PROPOSAL	.S.)	J.F. JANDA (NCT·F)		
1. Type of Well:					
OIL 553	GAS				
METT X	WELL OTHER				
2. Name of Operator	_		8. Well No.		
CHEVRON U.S.A. INC.			15 9. Pool name or Wildost		
3. Address of Operator P.O. BOX 1150 ATTN: P.R. MATTHEWS			SOUTH EUNICE		
4. Well Location	1000	COUTH	660 Feet From The EAST Line		
Unit Letter	: 1980 Feet From To	SOUTH Line and 22S Range	36E NAPM LEA County		
Section	•	on(Show whether DF, RKB, RT, GR, etc.)	SOL SOL		
		3576' GL			
	Check Appropriate Box to Indicate Nat				
NOTICE OF INTEN	•• •	SUBSEQUENT RE	PORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTER CASING		
	H	COMMENCE DRILLING OPNS.	PLUG AND ABAN.		
TEMPORARILY ABANDON	CHANGE PLANS				
PULL OR ALTER CASING		CASING TEST AND CMT JOB			
OTHER:	L	OTHER: ADD PERFS	X		
	Rearly state all pertinent details, and give pertinent de	ates, including			
estimeted date of starting any proposed work)	SEE MULE 1103.				

MIRU, POOH WITH PRODUCTION EQUIP.

PERF WITH 4" GUNS, 2 JHPF AT 3578'-3651', 120 DEG PRSE

ACDZ PRFS WITH 35 BBLS OF 15% HCL, SWAB BACK ACID

FRAC PERFS WITH 55,370 GALS OF GEL AND 200,500# OF BRADY SAND.

FLOW WELL BACK. RETURN TO PRODUCTION.

RELEASED RIG ON 4-5-95.

ereby certify that the ir	formation above is true and complete to the best of my knowledge and	TEAUNIAN AAAATANT	DATE:	5/12/95
PE OR PRINT NAME	P.R. MATTHEWS		TELEPHONE NO.	(915) 687-7812
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE			DATE	MAR 4.5 1035

REPERT

OFFICE