

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>30-025-08886</b>	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. N/A	
7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT	
8. Well No. 187	
9. Pool name or Wildcat ARROWHEAD/GB	

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
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 P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS	
4. Well Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>WEST</u> Line Section <u>12</u> Township <u>22S</u> Range <u>36E</u> NMPM <u>LEA</u> County	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3481 GE	

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 type="checkbox"/>
CASING TEST AND CMT JOB <input type="checkbox"/>	OTHER: <u>DPN, RUN LINER, LOG, PERF &amp; CONVERT TO INJECTION</u> <input checked="" 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.

MIRU, POOH WITH PRODUCTION EQUIP.  
TESTED CASING FROM 515-3629 TO 500#-OK. LEAKED AT 451-513.  
SQUEEZED LEAK WITH 206 SXS. CEMENT, DRILLED OUT CEMENT.  
DRILLED NEW FORMATION FROM 3780-3905.  
RUN 4 1/2" LINER FROM 0'-3905'. PUMPED 500 SXS. CEMENT AND CIRCULATED TO SURFACE.  
DRILLED OUY CEMENT TO 3903'.  
PERFORATED 3693-3833, 142 HOLES, 2 JHPF, 180 DEG. PHSD.  
ACIDIZED WITH 9 BBLs OF 15% NEFE, SWAB BACK ACID.  
TIH WITH INJ. TBG AND PACKER, SET AT 3653'. LOAD BACK SIDE AND TEST TO 300#-OK.  
WORK STARTED 6-26-92 ENDED 7-9-92.  
CONVERT TO INJECTION.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE P.R. Matthews TITLE TECH. ASSISTANT DATE: 7-14-92  
TYPE OR PRINT NAME P.R. MATTHEWS TELEPHONE NO. (915)687-7812

**ORIGINAL SIGNED BY JERRY SEXTON**

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE JUL 17 '92  
CONDITIONS OF APPROVAL, IF ANY:

