Submit 3 Copies to Appropriate

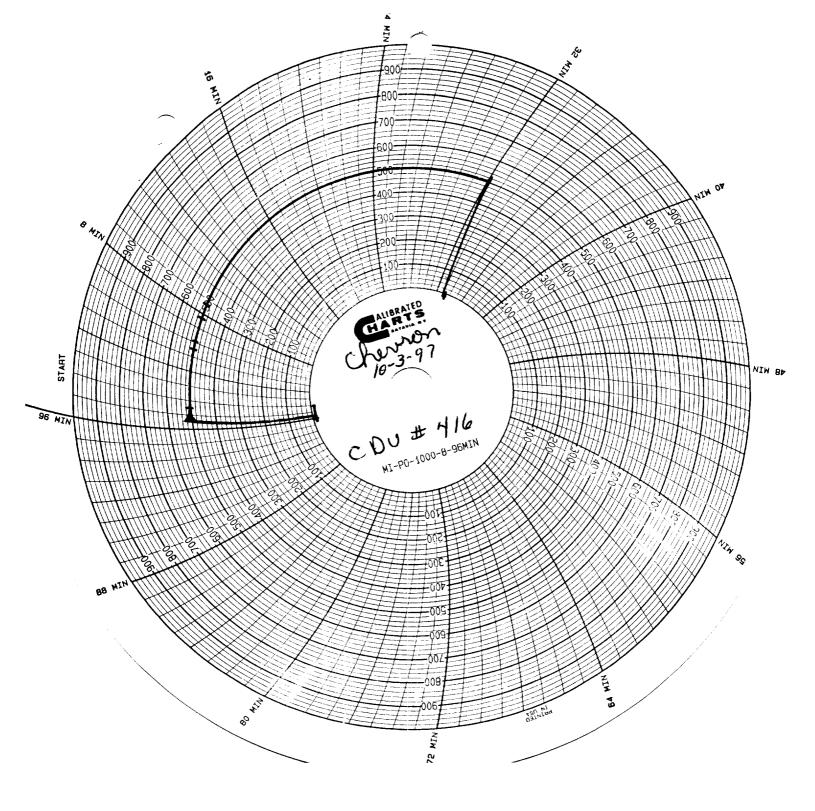
State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	3 , , , , , , , , , , , , , , , , , , ,		Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	IL CONSERVATIO		WELL API NO.
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-025-25262 5. Indicate Type of Lease
DISTRICT III			STATE FEE X
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.
	S AND REPORTS ON WELL		
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOI (FORM C-101	SALS TO DRILL OR TO DEEPEN C R. USE "APPLICATION FOR PERM) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A MIT"	7. Lease Name or Unit Agreement Name
1. Type of Well: OIL GAS WELL WELL	OTHER		CENTRAL DRINKARD UNIT
2. Name of Operator		2 1	8. Well No.
Chevron U.S.A. Inc.			416
3. Address of Operator P.O. Box 1150, Midland, T	X 79702		9. Pool name or Wildcat DRINKARD
4. Well Location		Line and 34	
Unit Letter P: 1305	Feet From The SOUTH	Line and 34	8 Feet From The EAST Line
Section 28	Township 21S Ran		NMPM LEA County
	10. Elevation (Show whethe	r Dr, KKB, KI, GK, etc	·)
11. Check Appro	priate Box to Indicate I	Nature of Notice,	Report, or Other Data
NOTICE OF INTE	ENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	
PULL OR ALTER CASING		CASING TEST AND CEI	
OTHER:		OTHER:TA'D	X
 Describe Proposed or Completed Operation work) SEE RULE 1103. 	is (Clearly state all pertinent deta	ils, and give pertinent dat	es, including estimated date of starting any proposed
DOM MADON FORT SET	CIDD & COMO! CIDO 1EA	מאר מינו ביינו	TOTTE OGG FOR BOT OG WEN
POH W/PROD EQPT. SET (CIDP @ 0303 . CIRC 150	BBL PKK FLUID. II	ESTED CSG 500 PSI 30 MIN.
TA'D 10/3/97			
		This Appr	and of the areas
			2003 of Tampology 22 Daylors 11-17-2002
I hereby certify that the information above is true and	i complete to the best of my knowledge	and belief.	
SIGNATURE J. K. KIPLLY	TITLE	TECHNICAL ASSI	STANT DATE10/22/97
TYPE OR PRINT NAME J. K. RIPLE			TELEPHONE NO. (915)687-7148
(This space for State Use)	100 111 Grad		
(This space for State Use) ORIGINAL SUPPLY OF DISTANCE OF	UPERVISOR		5) 1 2 c annu
APPROVED BY	тпи		DATE 01 18 1987

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fat Tucking unit signer

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