Submit 3 Copies to Appropriate District Office

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

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

WELL API NO. 30-025-26446

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(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 ☒ GAS WELL ☐ OTHER

7. Lease Name or Unit Agreement Name: Central Drinkard Unit

2. Name of Operator: Chevron U.S.A. Inc.

8. Well No. 427

3. Address of Operator: P.O. Box 670, Hobbs, NM 88240

9. Pool name or Wildcat: Drinkard

4. Well Location
Unit Letter G : 2530 Feet From The North Line and 2430 Feet From The East Line
Section 29 Township 21S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3447

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: Cleanout Fill & Acidize ☒	

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 PU, POOH W/ PE & PROD TBG RIH W/ BIT BK CIRC W/ FOAM UNIT CO FROM 6530-71 CIRC HOLE CLEAN POOH TIH W/ PKR TESTING TBG 5000 PSI A.S. SET PKR @ 6503 & TST CSG 400 PSI, OK, TST ANN 500 PSI & LINES 5000 PSI ACDZ Perfs 6550-6612 W/ 3000 GALS & 600# GRS AIR 4-BPM MAX-2600 PSI AP-2350 ISIP-1100, 10 MIN 0 PSI SWAB SFL-2800 EFL-4900 REC TR BO & 45 BW POH W/ PKR & TIH TO 6612 (NO FILL) POH & RAN PROD TBG & RODS, TURN WELL OVER TO PROD.

WORK STARTED 4-4-90 WORK ENDED 4-8-90

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

SIGNATURE M. E. Akins 4/10/90 TITLE Staff Drlg. Engr. DATE 4-9-90

TYPE OR PRINT NAME M.E. Akins TELEPHONE NO. 393-4121

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE APR 12 1990

CONDITIONS OF APPROVAL, IF ANY: