

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. 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.

OIL WELL ☐ GAS WELL ☐ OTHER- Water Injection Well		7. Unit Agreement Name North Seven Rivers Queen Un
Name of Operator Chevron U.S.A. Inc.		8. Farm or Lease Name North Seven Rivers Queen Un
Address of Operator P. O. Box 670, Hobbs, NM 88240		9. Well No. 10 WE
Location of Well UNIT LETTER F 2623 FEET FROM THE North LINE AND 1330 FEET FROM ME West LINE, SECTION 04 TOWNSHIP 22S RANGE 36E N.M.P.M.		10. Field and Pool, or Wildcat Eunice South SR-Gu
15. Elevation (Show whether DF, RT, CR, etc.)		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

DRILL REMEDIAL WORK ☐	PLUG AND ABANDON ☐
ORABLY ABANDON ☐	CHANGE PLANS ☐
OR ALTER CASING ☐	OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOBS ☐	
OTHER ☐	

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 EWS. 2 3/8 X 5 1/2 annulus had 750#. Released Baker AD-1. POH. RIH w/redressed AD-1 on 2 3/8" tbg. Hydro test tbg to 5000#. RU pmp trk. Circ. pkr. fluid. Set AD-1 @ 14 pts tension. NDBOP, NUWH. Pressure test csg to 325# for 30 min. OK. RDMOPU. Return well to injection. Replaced 1 jt 2 3/8" tbg w/whole in it. Stabilized well @ 280 bwpd injection, 600# TP, 0# CP. OCD notified 8-8-88, 8:30 AM.

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

TITLE New Mexico Area Supt.

DATE 8-16-88

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE

DATE

TIONS OF APPROVAL, IF ANY: