

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

WATER SUPPLY WELL

2. Name of Operator

CHEVRON U.S.A. INC.

3. Address and Telephone No.

P.O. BOX 1150 MIDLAND, TX 79702 (915) 687-7812

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 1, T 22 S, R 36 E
2540 FNL f' 1220 FWL

5. Lease Designation and Serial No.

NM-62665

6. If Indian, Allottee or Tribe Name

N/A

7. If Unit or CA, Agreement Designation

ARROWHEAD
GRAYBURG UNIT

8. Well Name and No.

AGU # 601

9. API Well No.

30-025-31303

10. Field and Pool, or Exploratory Area

SAN ANDRES WATER Supply

11. County or Parish, State

LEACO. NEW MEXICO

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other DRILLING SUMMARY
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

DRILL AND Survey TO 4080'

Set 8 5/8 CSG. TO 4080'

PUMP 675 SXs. CMT. CIRC 341 SXs.

Test CSG TO 1000 PSI-OK. WOC 24+ HRS.

DRILL OUT SHOE AND CONTINUE TO DRILL NEW FORMATION.

14. I hereby certify that the foregoing is true and correct

Signed P.R. Matthews

Title TECHNICAL ASSISTANT

Date 10-14-91

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____