

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

<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.)		API NO. (assigned by OCD on New Wells) <b>30-025-31379</b>
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTOR <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>CHEVRON U.S.A. INC.</b>		6. State Oil & Gas Lease No. <b>N/A</b>
3. Address of Operator <b>P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS</b>		7. Lessee Name or Unit Agreement Name <b>ARROWHEAD GRAYBURG UNIT</b>
4. Well Location Unit Letter <b>1</b> : <b>1980</b> Feet From The <b>SOUTH</b> Line and <b>635</b> Feet From The <b>EAST</b> Line Section <b>12</b> Township <b>22S</b> Range <b>36E</b> NMPM <b>LEA</b> County		8. Well No. <b>203</b>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <b>3457 GE</b>		9. Pool name or Wildcat <b>ARROWHEAD /GB</b>

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

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTER CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABAN. ☐  
CASING TEST AND CMT JOB ☐  
OTHER: **NEW WELL COMPLETION** ☒

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.

DRILL OUT TO 3875', TEST CASING TO 1000 PSI-OK.  
PERF 3860-3866, ZONE 5, ACDZ W/200 GALS OF 15% NEFE.  
SQUEEZE ZONE #5 3840-3866.  
PERF ZONES 1-4 3796-3638, ACDZ AND SWB/TST.  
SET CICR AT 3568 AND SQZ BELOW WITH CEMENT.  
DRILL OUT CICR AND DRILL TO 3582.  
PERF ZONES 1-4 3796-3657.  
ACDZ AND SWB/TST ALL ZONES.  
TIH W/TBG AND PKR TO 3570 AND SET.  
TEST PKR AT 3570' AND BEGIN 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: 12-11-91

TYPE OR PRINT NAME P.R. MATTHEWS TELEPHONE NO. (915)687-7812

APPROVED BY [Signature] TITLE [Blank] DATE [Blank]  
CONDITIONS OF APPROVAL, IF ANY: [Blank]