Submit 3 Copies

to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT I	Santa Fe, r	New Mexico 8/504-2088		
P.O. Box 1980, Hobbs, NM 8824	10			
DISTRICT II			API NO. (assigned by OCD on New Wells)	
P.O. Drawer Dd, Artesia, NM 882	210	30-025-31390		
DISTRICT III			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, Nm	87410		STATE X FEE	
			6. State Oil & Gas Lease No.	
	CUNDY NOTICES AND DEE	N/A		
	SUNDRY NOTICES AND REP			
			7. Lease Name or Unit Agreement Name	
	DIFFERENT RESERVOIR. USE "APP		ARROWHEAD GRAYBURG UNIT	
A T ()4/ ()	(FORM C-101) FOR SUCH PROI	POSALS.)		
1. Type of Well: OIL	GAS			
WELL		CTOR		
	WELL OTHER 1143E			
2. Name of Operator	1.0.4.100		8. Well No.	
CHEVRON U	J.S.A. INC.	235		
3. Address of Operator	AND TY TOTOG ATTN DD	9. Pool name or Wildcat		
	AND, TX 79702 ATTN: P.R.	ARROWHEAD/GB		
4. Well Location Unit Letter	I : 1980 Feet From	The SOUTH Line and	457 669 Feet From The EAST Line	
Section 13	Township	22S Range		
		ition(Show whether DF, RKB, RT, GR, etc		
<i>iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii</i>	Charle Annonciate Bourte Indian	3448 GE		
	INTENTION TO:	ite Nature of Notice, Report, or Oth SUBSEQUENT		
PERFORM REMEDIAL WORK	PLUG AND ABANDON		7	
	-	REMEDIAL WORK	ALTER CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND ABAN.	
PULL OR ALTER CASING		CASING TEST AND CMT JOB		
OTHER:		OTHER: DRILLING SUMM	MARY X	
		-		
12. Describe Proposed or Comp	leted Operations(Clearly state all pertinent of	details, and give pertinent dates, including		
	proposed work) SEE RULE 1103.			

MIRU ROD-RIC ON 9-1-92, SPUD 12.25" HOLE, DRILL AND SURVEY TO 1210'.

RUN 8 5/8" CASING TO 1210'.

PUMP 750 SXS. CMT AND CIRC. 186 SXS. TO SURFACE.

WAIT ON CEMENT FOR 22.5 HOURS.

TEST CASING TO 1000#-OK.

DRILL OUT FLOAT, CMT. AND SHOE, DRILL AND SURVEY TO 3881'

LOG HOLE WITH GR-CAL-CNL-SLD.

RUN 5 1/2" CASING TO 3881'.

PUMP 800 SXS. CMT AND CIRC. 130 SXS. TO SURFACE.

INSTALL WELLHEAD AND RELEASE RIG AT 21:00 HRS. ON 9-7-92.

hereby certify t SIGNITURE	hat the information	n aboverie true and com	plete to the best o TITLE	f my knowledge and belief. TECH. ASSISTANT	DATE:	9-14-92
TYPE OR PRINT NAME P.R. MATTHEWS					TELEPHONE NO	o. (915)687-7812
ORIGINAL SIGNED BY JERRY SEXTON APPROVED BY DISTRICT I SUPCIO 19408 TITLE					DATE	SEP 16 192

RECEIVED SEP 1 5 199?

OCD HOBBS OFFICE