

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION

Form C-103
Revised 1-1-89

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

| | | |
|---|--|---|
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | API NO. (assigned by OCD on New Wells) 30-025-31417 |
| 1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator CHEVRON U.S.A. INC. | | 6. State Oil & Gas Lease No. N/A |
| 3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE | | 7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT |
| 4. Well Location Unit Letter F : 1980 Feet From The NORTH Line and 2276 Feet From The WEST Line Section 2 Township 22S Range 36E NMPM LEA County | | 8. Well No. 155 |
| 10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3552 GE | | 9. Pool name or Wildcat ARROWHEAD/GB |

11

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

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTER CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABAN. <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | | CASING TEST AND CMT JOB <input type="checkbox"/> | |
| OTHER: <input type="checkbox"/> | | OTHER: ADD PERF & ACDZ (SAME ZONE) <input checked="" type="checkbox"/> | |

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.

WORK PERFORMED 10-2 THRU 10-5-92
PERF WITH 4" CSG GUN, 2 JHPF, 3722-3962, TOTAL OF 32 HOLES
ACDZ PERFS W/4 BBLs 15% NEFE HCL. SWB BACK LOAD.
RUN RODS & PMP, HANG WELL ON, RETURN TO PRODUCTION.

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

SIGNATURE Nita Rice TITLE TECHNICAL ASSISTANT DATE: 10-26-92
TYPE OR PRINT NAME NITA RICE TELEPHONE NO. (915)687-7436

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT I SUPERVISOR DATE OCT 29 '92
CONDITIONS OF APPROVAL, IF ANY: