

Submit to Appropriate
District Office
State Lease-6 copies
Fee Lease-5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-88

OIL CONSERVATION DIVISION

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

AMMENDED PERMIT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OF PLUG BACK					
1a. Type of Work: DRILL <input checked="" type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>			API NO. (assigned by OCD on New Wells) 30-025-31437		
b. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER WELL <input type="checkbox"/> INJECTOR <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>			6. 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: P.R. MATTHEWS			7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT		
4. Well Location Unit Letter <u>A</u> : <u>630</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line Section <u>13</u> Township <u>22S</u> Range <u>36E</u> NMPM <u>LEA</u> County			8. Well No. 220		
13. Elevation (Show DF,RT, GR, etc.) 3449.9 GE			10. Proposed depth 4500'		12. Rotary or C.T. ROTARY
14. Kind & Status Plug Bond BLANKET		15. Orig Contractor UNKNOWN		16. Date Work will start ASAP	
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8"	23	1350'	800	SURFACE
7 7/8"	5 1/2"	15.5	4500'	900	SURFACE

CHEVRON REQUEST PERMISSION TO CHANGE LOCATION.

OLD LOCATION: 660 FNL & 660 FEL.

NEW LOCATION: 630 FNL & 660 FEL.

ALL OTHERS LEGALS WILL REMAIN THE SAME.

IN ABOVE SPACE DESCRIBE PROPOSED PROG IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE P.R. Matthews TITLE TECHNICAL ASSISTANT DATE 8-4-92

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

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE AUG 06 '92

CONDITIONS OF APPROVAL, IF ANY: