

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

**OIL CONSERVATION DIVISION**

2040 Pacheco St.  
Santa Fe, NM 87505

DISTRICT I

P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-34297
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT
8. Well No. 336
9. Pool name or Wildcat ARROWHEAD; GRAYBURG

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(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.)

1. Type of Well:  
OIL WELL  GAS WELL  OTHER

2. Name of Operator  
Chevron U.S.A. Inc.

3. Address of Operator  
P.O. Box 1150, Midland, TX 79702

4. Well Location  
Unit Letter A : 50 Feet From The NORTH Line and 55 Feet From The EAST Line  
Section 2 Township 22S Range 36E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3548'

11.

**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  ALTERING CASING
- COMMENCE DRILLING OPNS.  PLUG AND ABANDONMENT
- CASING TEST AND CEMENT JOB
- OTHER: \_\_\_\_\_

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.

SPUDED 12-1/4" HOLE 3/10/98. DRILLED TO 524', SET 9-5/8" CSG. CMTD W/300 SX CL "C", CIRC TO SURF. DRILLED TO 3724', SET 7" CSG. CMTD W/150 SX CL "H" & 500 SX CL "C", CIRC TO SURF.

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

SIGNATURE J. K. Ripley TITLE TECHNICAL ASSISTANT DATE 3/19/98

TYPE OR PRINT NAME J. K. RIPLEY TELEPHONE NO. (915)687-7148

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: