Submit 3 Copies
to Appropriate

2

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office	OIL CONSERV	ATION DIVISION	•••	Usained 1-1-08
	P.O. 1	3ox 2088		
DISTRICT I	Santa Fe, N	lew Mexico 87504-2088		
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II			API NO. (assigned by OCD on Ne	Walls
P.O. Drawer Dd, Artesia, NM 88210			30-025-0	
DISTRICT III			5. Indicate Type of Lesse	
1000 Rio Brazos Rd., Aztec, Nm 874	10		STATE	FEE
			6. State Oil & Gas Lease No.	
CII	INDRY MOTICES AND DED	OUTC ON MELLO	N/A	
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"			7. Lease Name or Unit Agreeme	nt Name
(FORM C-101) FOR SUCH PROPOSALS.)			H. C. COLLINS	
1. Type of Well: OIL GAS				
_	WELL X OTHER			
2. Name of Operator			8. Well No.	
CHEVRON U.S. 3. Address of Operator	.A. INC.		#4	
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE			9. Pool name or Wildcat EUMONT YATES 7 RV	/RS OLIEEN
4. Well Location		0011711		7113 COEEN
Unit Letter K Section 14	: 1980 Feet From T	746	1980 Feet From The	WEST Line
		ZIS Range on(Show whether DF, RKB, RT, GR, etc.		LEA County
		3653' GR		
11 C	Check Appropriate Box to Indecate			
NOTICE OF INT	PLUG AND ABANDON	SUBSEQUENT I	7	
=	CHANGE PLANS	REMEDIAL WORK COMMENCE DRILLING OPNS.	ALTER CASING	
PULL OR ALTER CASING		CASING TEST AND CMT JOB	PLUG AND ABA	N
OTHER: ADD PERFS	X	OTHER:	1	┌┐
		_		
12. Describe Proposed or Completed Operations(Clearly state all pertinent details, and give pertinent dates, including				
esticated date of starting any proposed work) SEE RULE 1103.				
WE PROPOSE T	ro:			ļ
MIRU PU, KILL	WELL, NU BOPE, RIH & SE	T LOKSET PKR & ON/OFF	TOOL @ 3460'.	;
RUN GR/CCL-CBL LOG F/3460 TO TOC. PERF YATES/7 RIVERS @ 2926-3245' W/1 JHPF, TTL 10 HOLES.				
ACDZ PERFS W/5000 GALS NEFE HCL. FLOW BACK. ND BOP, NU WH PULL PLUG				
F/PKR. SWAB QUEEN/PENROSE ZONE. TURN OVER TO PRODUCTION.				
I hereby certify that the information abo	ove is true and complete to the best of n	y knowledge and belief		
SIGNITURE / Uta	rice TITLE	TECHNICAL ASSISTANT	DATE: 8/24/93	
TVOS OD DOUGE	IITA DICE			
TYPE OR PRINT NAME N	IITA RICE		TELEPHONE NO. (915)687-	7436
	INIAI CICNED DV IEDDV CI	EXTON	DATE AUG 26	1993
CONDITIONS OF APPROVAL, IF ANY:	INAL SIGNED BY HERRY SI		DATE 400 & 0	1000