Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office En y, Minerals and Natural Resources District I Revised March 25, 1999 1625 N. French Dr., Hobbs, NM 87240 .. ELL API NO. District II OIL CONSERVATION DIVISION <u>30-025-04806</u> 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 STATE **x** FEE  $\square$ District IV 2040 South Pacheco, Santa Fe, NM 87505 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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 X Gas Well W. A. RAMSAY (NCT-A) Other 2. Name of Operator 8. Well No. Chevron U.S.A. Inc. 47 3. Address of Operator 9. Pool name or Wildcat P.O. Box 1150 Midland, TX 79702 EUMONT; YATES-7 RVRS-QUEEN (OIL) 4. Well Location 1980 feet from the\_\_ SOUTH \_\_ line and 660 feet from the line Section Township 21S Range **NMPM** County LEA 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OFNS. FLUG AND X **ABANDONMENT** PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. TAGGED CIBP @ 3701'. CIRC HOLE W/P&A MUD. SPOTTED 25 SX CMT 3701'. SPOTTED 35 SX CMT 2850'; TAGGED @ 2560'. SPOTTED 35 SX CMT 1675'; TAGGED @ 1394'. CIRC 5-1/2" CSG FULL OF CMT. SET MARKER, CLEANED LOCATION. P&A'D 11/20/01 I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE REGULATORY O.A. \_DATE\_ Type or print name J. K. RIPLEY Telephone No. (915)687-7148 (This space for State use) APPROVED BY TITLE DATE Conditions of approval, if any