

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO. 30-025-04815
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name S. E. Felton
8. Well No. 1
9. Pool name or Wildcat Eumont V-SR-QN

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 USA INC	
3. Address of Operator P.O. Box 1150 Midland TX 79702 Attn: E.O. Doherty	
4. Well Location Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line Section 28 Township 21S Range 36E NMPM LEA County	
10. Elevation (Show whether DF, 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 ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: Plugback Perf ☒	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.

MIRU SET CIBP @ SET @ $\pm 3635'$ Dump 35' CRT on top. RIH
PERF W/4" CS9 GUNS F/3193-3519 1 JHPF 24 holes total.
ACD'2 W/3100 gals SWAB FRAC W/72000 gals 50/50 GE1 + CO2
+ 169000# 12/20 SD. SWAB + flow well turn over to production.

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

SIGNATURE **E.O. Doherty** TITLE **T.A. Delg** DATE **2/18/91**
TYPE OR PRINT NAME **E.O. DOHERTY** TELEPHONE NO. **681-7812**

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE **FE-2-1991**
CONDITIONS OF APPROVAL, IF ANY: