

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

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" (FORM C-101) FOR SUCH PROPOSALS.)		API NO. (assigned by OCD on New Wells) 30-025-04897
		6. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
1. Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input checked="" type="checkbox"/> WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. State Oil & Gas Lease No. B-1732
2. Name of Operator CHEVRON U.S.A. INC.		7. Lease Name or Unit Agreement Name W.A. RAMSAY (NCT-A)
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE		8. Well No. 21
4. Well Location Unit Letter P : 660 Feet From The SOUTH Line and 660 Feet From The EAST Line Section 34 Township 21S Range 36E NMPM LEA County		9. Pool name or Wildcat EUMONT YATES-SR-QUEEN
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 <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CMT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABAN. <input checked="" type="checkbox"/>

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.

WORK PERFORMED 10-5 THRU 10-7-92

SET CIBP @ 3750', LOAD ANN & TEST TO 300# OK. CAP CIBP W/15 SX.(3750-3595). COVERS QUEEN.

SET BALANCED PLUG 3310-3000. W/25 SXS. CMT. COVERS YATES AND 7-RIVERS PAY.

SET BALANCED PLUG FROM 1635'-1395',(25 SXS.) COVERS RUSTLER AND TOP OF SALT.

PERF HOLES AT 285', BREAK CIRC BETWEEN 5-1/2" & 8 5/8" CSG, PUMP 85 SXS. CMT AND LEAVE CSG. FULL.

CUT OFF WELLHEAD @ ANCHORS & INSTALL P & A MARKER.

10# P & A MUD WILL BE PLACED BETWEEN ALL CMT. PLUGS.

CHANGE WELL STATUS TO P & A.

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

SIGNATURE Nita Rice TITLE TECHNICAL ASSISTANT DATE: 10/19/92

TYPE OR PRINT NAME NITA RICE TELEPHONE NO. (915)687-7436

APPROVED BY Lyle F. Turna TITLE OIL & GAS INSPECTOR DATE DEC 28 '92

CONDITIONS OF APPROVAL, IF ANY: