Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office

OIL CONSERVATION DIVISION

P.O. Box 2088 DISTRICT Santa Fe, New Mexico 87504-2088	
<u>DISTRICT I</u> Sania Fe, New Mexico 6/504-2066 P.O. Box 1980, Hobbs, NM 88240	
DISTRICT II	API NO. (assigned by OCD on New Wells) 30-025-04921
P.O. Drawer Dd, Artesia, NM 88210 DISTRICT III	5. Indicate Type of Lesse
1000 Rio Brazos Rd., Aztec, Nm 87410	STATE X FEE
	6. State Oil & Gas Lease No. N/A
SUNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK	7. Lesse Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	ANNOWNEAD GIVET BOILD ONLY
1. Type of Well:	†
OIL GAS WELL X WELL OTHER	
2. Name of Operator	8. Well No.
CHEVRON U.S.A. PRODUCTION CO.	140
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE	9. Pool name or Wildcat ARROWHEAD/GB
4. Weil Location Unit Letter : 660 Feet From The SOUTH Line and	660 Feet From The EAST Line
Section 35 Township 21-S Range	36-E NMPM LEA COUNTY
10. Elevation(Show whether DF, RKB, RT, GR, etc. 3560 GE	1
11 Check Appropriate Box to Indecate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTER CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABAN.
PULL OR ALTER CASING CAT JOB CASING TEST AND CMT JOB COTHER: OTHER:	.1
OTHER: DPN, PERF, STIM. X OTHER:	
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.	
esticated data or starting any proposed work; SEE NOLE 1105.	
MIRU, POOH WITH PRODUCTION EQUIP.	
DRILL NEW FORMATION FROM 3860-3940.	
LOG HOLE: SDL-DSN-GR-CAL-CCL.	
ACIDIZE OPEN HOLE WITH 1500 GALS. OF 15% NEFE. SWAB TEST HOLE.	
ADD PERFS AS PER LOG WITH 4" GUNS, 2 JHPF, 80 DEG PHSD. ACDZ PERFS WITH 500 GALS OF 15% NEFE. SWAB TEST.	
TIH WITH TBG. AND RODS. RETURN TO PRODUCTION ON 4-14-92	
THE WITH TBG. AND RODS. RETORN TO PRODUCTION ON 4-14-52.	
Thereby certify that the information above is tiple and complete to the best of my knowledge and belief. SIGNITURE TITLE REMEDIAL ENGINEER	DATE: 03/15/1993
TYPE OR PRINT NAME JOE CARTER	TELEPHONE NO. (915)687-7549
JAIGINAL MONTE PY JERRY SENTON	14.11.12.18.33
APPROVED BY THE CONDITIONS OF APPROVAL, IF ANY:	DATE