

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.
30-025-04928

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No. N/A

7. Lease Name or Unit Agreement Name
ARROWHEAD GRAYBURG UNIT

8. Well No. 142

9. Pool name or Wildcat
ARROWHEAD GRAYBURG

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 U.S.A. INC.

3. Address of Operator
P.O. BOX 1150 MIDLAND, TX 79702

4. Well Location
Unit Letter N : 660 Feet From The SOUTH Line and 1980 Feet From The WEST Line

Section 36 Township 21S Range 36E NMPM IEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3515 GE

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: DEEPEN, LOG AND ACDZ ☒

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, POOH WITH PRODUCTION EQUIP. TIH WITH PACKER AND SET AT BTM, TEST 6" CASING TO 300 PSI-OK. CHANGE OUT WELL HEAD. TIH WITH BIT AND WASH TO BTM AT 3820'.
MILL FROM 3820-3836, DRY DRILL 3836-3870. LOG HOLE: SDL-DSN-CAL-GR-CCL. ACDZ WITH 1500 GALS OF 15% NEFE AT 3691-3870. SWAB TEST ZONES 2-5. PERF ZONE 1 3661-64.
2 JHPF, 180 DEG, PHSD. ACDZ WITH 300 GALS OF 15% NEFE. SWAB BACK ACID.
TRIP IN HOLE WITH PROD. EQUIP. RDMO ON 2-14-92.

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

SIGNATURE P.R. Matthews TITLE TECHNICAL ASSISTANT DATE 2-14-92

TYPE OR PRINT NAME P.R. MATTHEWS TELEPHONE NO. 687-7812

(This space for State Use)
Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE FEB 20 1992

CONDITIONS OF APPROVAL, IF ANY: