

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION

Form C-103
Revised 1-1-89

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

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

API NO. (assigned by OCD on New Wells)
30-025-04930
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. N/A
7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT
8. Well No. 126
9. Pool name or Wildcat ARROWHEAD/GB
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3537' GL

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTOR
2. Name of Operator CHEVRON U.S.A. INC.
3. Address of Operator (915) 687-7436 P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE
4. Well Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>36</u> Township <u>21S</u> Range <u>36E</u> NMPM <u>LEA</u> County

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: POLYMER TREAT <input checked="" type="checkbox"/>	OTHER: <input 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.

WE PROPOSE TO:

RUN INJECTION PROFILE LOG. PMP 15% NEFE HCL ACID TO CLEAN TBG.POLYMER TREAT WITH 800 BBLs OF 2-3 LB/BBL POLYMER SOLUTION. FLUSH. SWI FOR 4 DAYS. RETURN WELL TO INJECTION.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE <u>Nita Rice</u>	TITLE <u>TECHNICAL ASSISTANT</u>
DATE: <u>9/1/93</u>	
TYPE OR PRINT NAME <u>NITA RICE</u>	
TELEPHONE NO. <u>(915)687-7436</u>	
APPROVED BY <u>Orig. Signed by Paul Kautz Geologist</u>	TITLE <u>Geologist</u>
DATE <u>SEP 03 1993</u>	
CONDITIONS OF APPROVAL, IF ANY:	

RECEIVED

SEP 02 1993

COB RECORDS
OFFICE