

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I

P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.

30-025-21251

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

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 U : 940 Feet From The SOUTH Line and 940 Feet From The WEST Line

Section 4

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:

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: PERFD. ACZD. SQZD ☒

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.

POH W/PROD EQPT. PERFD 3752'-3800' W/3 JHPF. ACZD 3654'-3848' W/3500 GALS 15% RS II. SPOTTED 1950# SAND; TAGGED @ 3723'. CLEANED OUT TO 3732'. SET CIBP @ 3730'. ACZD PERFS W/1000 GALS 15% NEFE. SET CIBP @ 3612'; SQZD W/300 SX CL "C" @ 2000#, 50 SX ON FORM. DRLD CR & CMT TO 3720'. TSTD SQZ 400#. DRLD CIBP @ CMT TO 3907'. CIRC HOLE CLEAN. RIH W/PROD TBG, PUMP & RODS; TBG @ 3837'. RETURNED WELL TO PRODUCTION.

WORK PERFORMED 3/18/98 - 3/30/98

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

SIGNATURE

J. K. Ripley

TITLE TECH ASSISTANT

DATE 5/19/98

TYPE OR PRINT NAME J. K. RIPLEY

TELEPHONE NO. (915)687-7148

(This space for State Use)

APPROVED BY

ORIGINAL SIGNATURE OF SUPERVISOR
CHRIS WILLIAMS

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: