

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

API NO. (assigned by OCD on New Wells) 30-025-21620
6. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
8. State Oil & Gas Lease No. N/A
7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT
8. Well No. 107
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator CHEVRON U.S.A. INC.	
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE	
4. Well Location Unit Letter H : 1650 Feet From The NORTH Line and 330 Feet From The EAST Line Section 25 Township 21 SOUTH Range 36E NMPM LEA County	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3511' GL	

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: C/O, ADD PERF & RTP <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABAN. <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.

WORK STARTED 05/24/94. MIRU. ND WH, NU BOP.
PERF 3839'-3842', 3849'-3852'. SWAB. PERF 3829'-3675'. ACDZ W/2 BBLS EACH SET.
SWAB. ND BOP NU WH. RD PU. TURN WELL OVER TO PRODUCTION 05/27/94.

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

SIGNATURE <i>Wendi Kingston</i>	TITLE TECH. ASSISTANT	DATE: 05/31/94
TYPE OR PRINT NAME WENDI KINGSTON		TELEPHONE NO. (915)687-7436
APPROVED BY	TITLE ORIGINAL AND RE-FILED BY DISTRICT	DATE
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED

JUN 11 1994

OLD NEWS
OFFICE