

District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88241-1980
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131

New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

Form C-140
Revised 06/99

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

I. Operator and Well

Operator name & address CHEVRON U.S.A. INC. P. O. BOX 1150 MIDLAND, TX 79702						OGRID Number 4323		
Contact Party TANYA KERLEY						Phone 915-687-7615		
Property Name H. T. MATTERN NCT-C				Well Number 10		API Number 30-025-25411		
UL F	Section 8	Township 21S	Range 37E	Feet From The 2130'	North/South Line NORTH	Feet From The 1730'	East/West Line WEST	County LEA

II. Workover

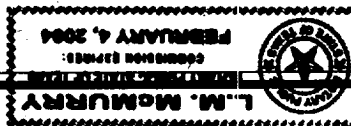
Date Workover Commenced: 7/17/00	Previous Producing Pool(s) (Prior to Workover): DRINKARD
Date Workover Completed: 8/30/00	

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

State of TEXAS)
) ss.
County of MIDLAND)
TANYA KERLEY, being first duly sworn, upon oath states:
1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.
Signature Tanya Kerley Title OFFICE ASSISTANT Date 1-11-01
SUBSCRIBED AND SWORN TO before me this 11 day of Jan, 2001.
L.M. McMurry
Notary Public
My Commission expires: 2-4-04



FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

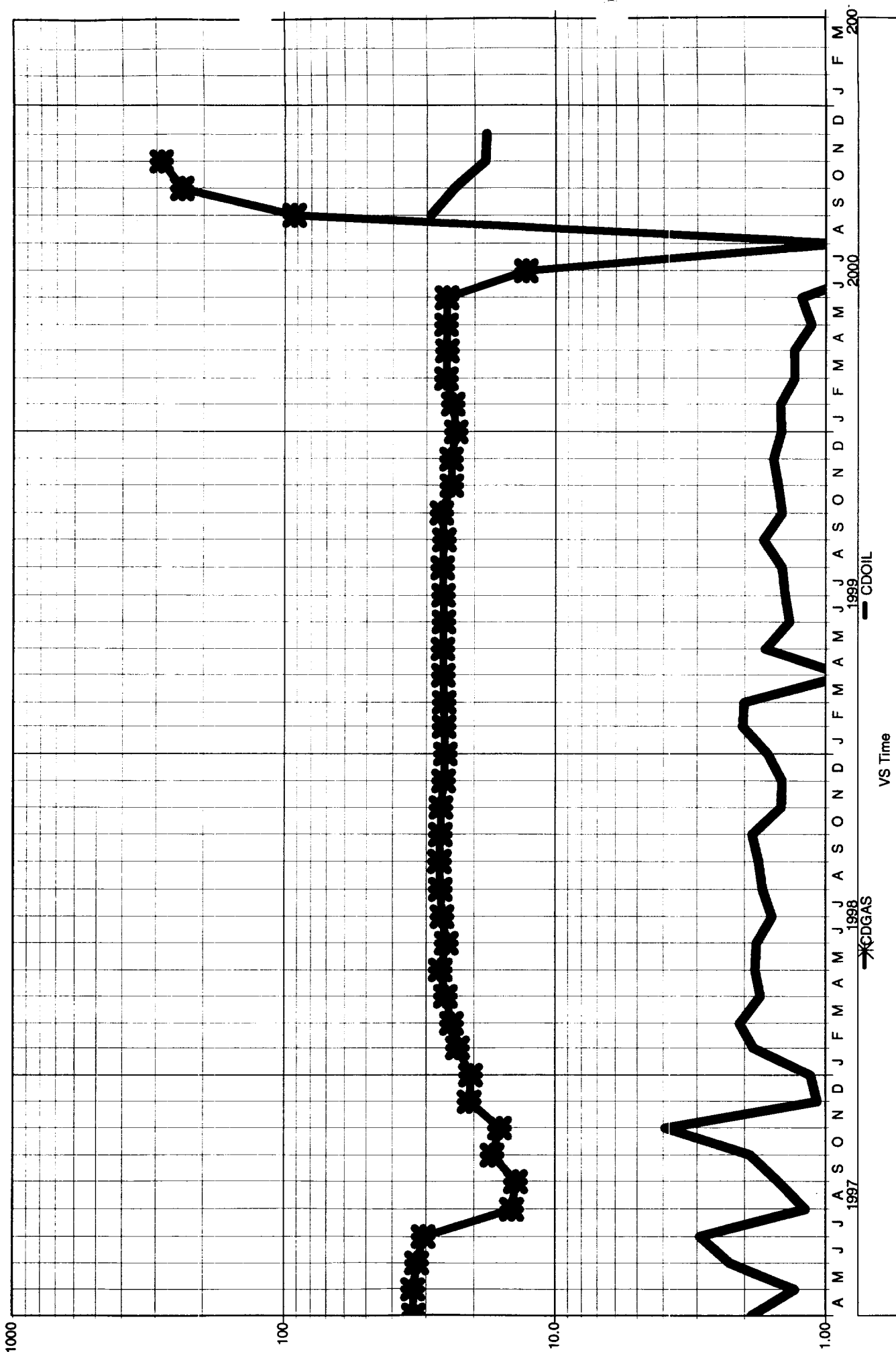
This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 8/30/2000.

Signature District Supervisor <u>Paul J. Kutz</u>	OCD District <u>1</u>	Date <u>1/23/2001</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

210

Group: Temporary Wells In Group: 2 Format: [p] tax inc format



Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. 30-025-25411
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: H. T. MATTERN (NCT-C)
8. Well No. 210
9. Pool name or Wildcat WANTZ; A30

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	
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 F : 2130 feet from the NORTH line and 1730 feet from the WEST line Section 8 Township 21S Range 37E NMPM County LEA	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3530'	

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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: **DEEPEMED** ☒

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

POH W/PROD EQPT. SQZD 6545'-6740' W/250 SX CMT; TOC @ 6199'. DO CMT & JUNK TO 6811'.
DRILD TO 7201'. CIRC CLEAN. LOGGED. SWABBED. ACZD 6938'-6985' W/1500 GALS 20%. SWABBED.
ACZD 6922'-6985' W/1500 GALS 20%. SWABBED. ACZD 6844'-6922' W/1500 GALS 20%. SWABBED.
ACZD 6990'-7200' W/2562 GALS 20%. SWABBED. FRACD 6800'-7201' W/30,000 GALS 20% GEL.
SWABBED. RTH W/TBG, PUMP & RODS; TBG @ 7138'. RETURNED WELL TO PRODUCTION.

WORK PERFORMED 7/17/00 - 8/30/00

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

SIGNATURE J. K. Ripley TITLE REGULATORY O.A. DATE 9/13/00

Type or print name J. K. RIPLEY Telephone No. (915) 687-7148

(This space for State use)

APPROVED BY DISTRICT I SUPERVISOR DATE SEP 29 2000
Conditions of approval, if any:

ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR