

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. 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.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name H. T. Mattern(NCT-C) #
Address of Operator P. O. Box 670, Hobbs, NM 88240	9. Well No. 12
Location of Well UNIT LETTER <u>E</u> , <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>8</u> TOWNSHIP <u>21S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or WHdcat Blinebry & Drinkard
11. Elevation (Show whether DF, RT, GR, etc.) 3522' GL	12. County Lea

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
WELL OR ALTER CASING <input type="checkbox"/>	OTHER <u>Repair casing, plug Drinkard perfs</u> <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

Test casing 5550' to surface and repair if necessary. If casing tests okay, straddle Drinkard perfs 6567-6740' and swab test for excessive water. Plug off Drinkard perfs if water productive.

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

BY M. E. Abbin TITLE Staff Drilling Engineer DATE 10-13-87ORIGINAL SIGNED BY JERRY SEXTON
APPROVED BY DISTRICT 1 SUPERVISOR TITLE _____ DATE OCT 15 1987
NOTATIONS OF APPROVAL, IF ANY: