Submit 3 Copies To Appropriate District Office	State of New Energy, Minerals and		Form C-103 Revised March 25, 1999					
District I	Energy, withords and read the Resources			WELL API	WELL API NO.			
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONSERVATION DIVISION				30-025-31305			
811 South First, Artesia, NM 87210 District III	2040 South Pacheco			5. Indicate	5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505			STA	ге 👿 Р	EE 🗌		
<u>District IV</u> 2040 South Pacheco, Santa Fe, NM 87505	505			6. State Oil	& Gas Lease 1	No.	7	
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.)				7. Lease Na	7. Lease Name or Unit Agreement Name:			
1. Type of Well: Oil Well Gas Well Other INDECTION				ARROWHEAD	ARROWHEAD GRAYBURG UNIT			
2. Name of Operator				8. Well No.	8. Well No.			
Chevron U.S.A. Inc.				139	139			
3. Address of Operator				9. Pool nan	9. Pool name or Wildcat			
P.O. Box 1150, Midland, TX 79702				ARROWHEAD	ARROWHEAD; GRAYBURG			
4. Well Location Unit Letter	660 feet from the	SOUTH	line and	1870 1	feet from the	EAST li	ine	
Section 35	Township 21	s Range	e 36 5	NMPM	Coun	ity LEA		
	10. Elevation (Show who			etc.)				
11. Check A	Appropriate Box to Indi	icate _i Natı	re of Notic	e. Report, or	Other Data			
•• •				JBSEQUEN		OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REM	IEDIAL WOR		_	RING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COM	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT					
PULL OR ALTER CASING	MULTIPLE COMPLETION		ING TEST AN IENT JOB	ND		NONWENT		
OTHER:		□ ОТН	ER: sozo, 1	ACZD			x	
12. Describe Proposed or Complete of starting any proposed work). or recompilation.		all pertine	nt details, and	l give pertinent				
POH W/TBG. ACZD W/2000 G 3820' & CIRC CLEAN. SQZD WASHED SAND TO 3990'. CI WELL TO INDECTION.	@ 3546' W/250 SX CMT.	TAGGED	@ 3559'; DO	OF TO 3819	'.			
WORK PERFORMED 9/16/99 -	9/24/99							
							_	
hereby certify that the information above	is true and complete to the bo	est of my kno	owledge and be	elief.				
signature J.K. Rypl	ly-	TITLE RE	GULATORY O.	Α	DATE_	1/11/00	_	
Type or print name J. R. RIPLEY	V				Telephone No.	(915) 687-71	48	
(This space for State use)	r Caragonia							
APPROVED BY	A Company	TITLE			DATE	: 		
Conditions of approval, if any:	* * * * *						1	

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