

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)

30-025-31524

5. Indicate Type of Lease

STATE



FEE ☐

6. State Oil & Gas Lease No.

N/A

7. Lease Name or Unit Agreement Name

ARROWHEAD GRAYBURG UNIT

8. Well No.

105

9. Pool name or Wildcat

ARROWHEAD/GB

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

GAS

WELL



WELL



OTHER

2. Name of Operator

CHEVRON U.S.A. INC.

3. Address of Operator

P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS

4. Well Location

Unit Letter F : 1880 Feet From The WEST Line and 2040 Feet From The NORTH Line
Section 25 Township 21S Range 36E NMPM LEA County

10. Elevation(Show whether DF, RKB, RT, GR, etc.)

3549 GE

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



ALTER CASING



COMMENCE DRILLING OPNS.



PLUG AND ABAN.



CASING TEST AND CMT JOB



OTHER:

DRILLING SUMMARY



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.

MIRU CAPSTAR RIG ON 2-24-92.
SPUD 12 1/4" HOLE, DRILL FROM 0'-1330'.
RUN 8 5/8" CASING TO 1330'.
PUMP 800 SXS. OF CEMENT AND CIRCULATE 183 SXS. TO SURFACE.
WAIT ON CEMENT FOR 18 HOURS.
DRILL OUT FLOAT AND CEMENT, DRILL FORMATION FROM 1330'-3960'.
RUN 5 1/2" CASING FROM 0'-3960'.
PUMP 825 SXS. OF CEMENT AND CIRCULATE 101 SXS. TO SURFACE.
INSTALL TUBING HEAD AND TEST.
RELEASE RIG IN 3-4-92.

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

SIGNATURE P.R. Matthews TITLE TECH. ASSISTANT

DATE: 3/6/92

TYPE OR PRINT NAME P.R. MATTHEWS

TELEPHONE NO. (915)687-7812

APPROVED BY _____ TITLE _____

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 09 '92