

Submit to Appropriate
District Office
State Lease-6 copies
Fee Lease-6 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

AMMENDED

Santa Fe, New Mexico 87504-2088

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

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OF PLUG BACK					
1a. Type of Work: DRILL <input checked="" type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>				API NO. (assigned by OCD on New Wells) 30-025-31577	
b. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>				5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
2. Name of Operator CHEVRON U.S.A. INC.				6. State Oil & Gas Lease No. N/A	
3. Address of Operator P.O. BOX 1150, MIDLAND, TX 79702 ATTN: P.R. MATTHEWS				7. Lease Name or Unit Agreement Name R.R. BELL (NCT-A)	
4. Well Location Unit Letter <u>J</u> : <u>1880</u> Feet From The <u>SOUTH</u> Line on <u>1650</u> Feet From The <u>EAST</u> Line Section <u>8</u> Township <u>21 SOUTH</u> Range <u>36 EAST</u> NMPM <u>LEA</u> County				8. Well No. 3	
				9. Pool name or Wildcat EUMONT GAS	
10. Proposed depth 4500'		11. Formation QUEEN		12. Rotary or C.T. ROTARY	
13. Elevation (Show DF, RT, GR, etc.) 3597.6' GE		14. Kind & Status Plug Bond BLANKET		15. Drig Contractor UNKNOWN	
				16. Date Work will start 12-1-92	
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
UNK.	8 5/8"	23	1350'	800	SURFACE
UNK.	5 1/2"	15.5	4500'	900	SURFACE

CHEVRON WISHES TO EXTEND THIS PERMIT FOR ANOTHER SIX MONTHS.

IN ABOVE SPACE DESCRIBE PROPOSED IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE P.R. Matthews TITLE TECHNICAL ASSISTANT DATE 11-6-92

TYPE OR PRINT NAME P.R. MATTHEWS TELEPHONE NO. (915)687-7812

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DATE NOV 10 '92
CONDITIONS OF APPROVAL, IF ANY:

Expires 4-9-93