Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office OIL CONSERVATION DIVISION	Heatiner 1-1-02
P.O. Box 2088	
DISTRICT Santa Fe, New Mexico 87504-2088	
P.O. Box 1980, Hobbs, NM 88240	
<u>DISTRICT II</u>	API NO. (assigned by OCD on New Wells)
P.O. Drawer Dd, Artesia, NM 88210	30-025-32161
DISTRICT III	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, Nm 87410	STATE FEE X
	6. State Oil & Gas Lease No.
	N/A
SUNDRY NOTICES AND REPORTS ON WELLS	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	ARNOTT RAMSAY (NCT-C)
(FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL GAS	
2. Name of Operator	
CHEVRON U.S.A. INC.	8. Well No.
3. Address of Operator	9. Pool name or Wildcat
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON	EUMONT GAS
4. Well Location	COMONT CAO
Unit Letter H : 1780' Feet From The NORTH Line and Section 21	680' Feet From The EAST Line
Section 21 Township 21S Range	36E NMPM LEA County
Management of the Control of the Con	3DE NMPM LEA County
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3606.3' GL	JUL NIMPM LEA County
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3606.3' GL 11 Check Appropriate Box to Indecate Natura of Notice, Report, or Other Data	SUL NAME LEA COUNTY
10. Elevation(Show whether DF, RKB, RT, SR, etc.) 3606.3' GL	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3606.3' GL 11 Check Appropriate Box to Indecate Nature of Notice, Report, or Other Data	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3606.3' GL 11 Check Appropriate Box to Indecate Natura of Natice, Report, or Other Date NOTICE OF INTENTION TO: SUBSEQUENT RE	PORT OF:
10. Elevation/Show whether DF, RKB, RT, GR, etc.) 3606.3' GL 11 Check Appropriate Box to Indecate Natura of Notice, Report, or Other Date NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	PORT OF:
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3606.3' GL 11 Check Appropriate Box to Indecate Nature of Natice, Report, or Other Date NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING CASING TEST AND CMT JOB	PORT OF:
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10. Elevation/Show whether DF, RKB, RT, GR, etc.) 3606.3' GL 11 Check Appropriate Box to Indecete Nature of Natice, Report, or Other Date NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including	PORT OF:
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I hereby certify that the information above SISNITURE	s true and complete to the plast of my knowledge and belief. OFFICE ASSISTANT	DATE:	9/22/93
TYPE OR PRINT NAME	WENDI KINGSTON	TELEPHONE NO.	(915)687-7826
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	DATE	SEP 24 1993

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