Form C-103 Revised 1-1-89

State of New Mexico Submit 3 copies to Appropriate District Office Er v, Minerals and Natural Resources Department DISTRICT I OIL CONSERVATION DIVISION WELL API NO P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088 30-025-33694 DISTRICT II Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Box Drawer DD, Artesia, NM 88210 STATE FEE [DISTRICT III State Oil / Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 37410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI MEREDITH GAS COM (FORM C-101) FOR SUCH PROPOSALS. Type of Well: GAS WELL **OTHER** 8. Well No. 2. Name of Operator CHEVRON USA INC Address of Operator 9. Pool Name or Wildcat 15 SMITH ROAD, MIDLAND, TX 79705 **EUMONT YATES 7 RVRS QUEEN** 4. Well Location Unit Letter A : 785' Feet From The NORTH Line and 660' Feet From The EAST Township 21-S Range 36-E LEA COUNTY 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON PERFORM REMEDIAL WORK REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPERATION PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: **REQUEST TA STATUS** 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. 9-23-02: MIRU. 9-24-02: TIH W/PROD PKR W/CN-OFF TOOL. TEST TBG TO 5000#. SET PKR @ 3005. LOAD BACKSIDE W/10# BRINE & TEST TO 500#. 9-25-02: ACIDIZE W/2000 GALS 15% HCL. MAKE 1 SWAB RUN PER HR. NO FLUID. ACIDIZE W/2000 GALS 15% HCL. DISPL W/40,000 SCF N2. 9-26-02: TIH W/PKR TO 3035. SET . TEST CSG TO 500#-OK. TIH W/CIBP & SET @ 3035. TEST CSG FOR TA STATUS TO 650# FOR 30 MIN. WITNESSED BY B. HILL-NMOCD. (ORIGINAL CHART & COPY OF CHART ATTACHED) WELL IS TEMPORARILY ABANDONED. This Approval of Temporary Abandonment Expires

TITLE Regulatory Specialist

DATE 10/18/2002

TYPE OR PRINT NAME

Denise Leake

Telephone No.

915-687-7375

(This space for State Use)

APPROVED

C.

CONDITIONS OF APPROVAL, IF AN

ORIGINAL SIGNED BY

OCT 28 2002

FIELD REPRESENTATIVE II/STAFF MANAGER

