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 CO		ATION DIVISI	ON					
		P.O. Box		00					
DISTRICT I		Fe, New	Mexico 87504-20	88					
P.O. Box 1980, Hobbe, NM 88240 DIS <u>TRICT !!</u>					API NO. (essigned by OCD on New Wells)				
P.O. Drawer Dd, Artesia, NM 88210					30-025-10023				
DISTRICT III					6. Indicate Type	of Lease	5.7	\neg	
1000 Rio Brazos Rd., Aztec, Nm 87410						STATE TA	FEE	ı	
					6. State Oil & (Gas Lease No.	(\Box	
					N/A				
S	UNDRY NOTICES A	ND REPO	RTS ON WELLS						
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG B					7. Lease Name	or Unit Agreement	Name		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"					E.A. STICH	ER			
	(FORM C-101) FOR SU	ICH PROPOS	SALS.)						
Type of Well: OIL	GAS				}			1	
WELL X	WELL OTHER							- 1	
2. Name of Operator						8. Well No.			
CHEVRON U.S.A. INC.					1				
3. Address of Operator					9. Pool name of		VELIEC	- 1	
P.O. BOX 1150 MIDLA	AND, TX 79702 AT	TN: P.R. I	MATTHEWS	·	PENROSE	SKELLY GRA	YBURG		
4. Well Location Unit Letter	: 660' F	eet From Th	south L	ine and	1980'	Feet From The	WEST Line	e	
Section 4		ownship 2	22S F	lange	37E	NMPM LE	A co	unty	
			Show whether DF, RKB, R	T, GR, et	c.)				
			3434' GE						
11	Check Appropriate Box	to Indecate							
	NTENTION TO:	,		CENT	REPORT OF	ALTER CASING			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	-	EMEDIAL WORK	ຸ ├	1	PLUG AND ABAN	, H		
TEMPORARILY ABANDON	CHANGE PLANS	_	OMMENCE DRILLING OPN	-	1	FEGG WID YOU	· L		
PULL OR ALTER CASING	J	- 1	ASING TEST AND CMT J	¹⁸ L	J				
OTHER:		ا ا	THER:						
12. Describe Proposed or Comp	leted OperationalClearly state	all pertinent de	tails, and give pertinent da	tes, inclu	ding				
	proposed work) SEE RULE 11			,	•				
	•								
IT IS PROPO									
SET CIBP AT 3500', SPOT 170' CMT F/3500'-3330', PLUG WILL COVER RAMSAY.									
SPOT 300' (CMT F/2790'-2490'	, PLUG C	OVERS BROWN 8	k YAT	ES.				
PERF AT 13	PERF AT 1300', SET CICR AT 1060' PUMP 100 SX. CMT INTO& LEAVE 35' CMT ON TOP.								
ABOVE PLU	G COVERS TOP OF	SALT, RU	JSTLER & 8 5/8"	CSG :	SHOE.				
PERF AT 35	0' & PUMP 85 SX	CMT CIRC	BETWEEN 5 1/2	" & 8	5/8" CSG,	LEAVE 5 1/2	" FULL.		
10# P & A N	AUD WILL BE PLACI	ED BETWI	EEN ALL CMT. PL	UGS.					
CUT OFF WI	ELLHEAD AND INST	ALL P &	A MARKER.						
	ELL STATUS TO P 8		•			4			
••••								1,	
								الأصدر	
I hereby certify that the ipjormet	ion above is true and complete	to the best of	my knowledge and belief.		-				
SIGNITURE P.K.	MI (III)	TITLE	TECH. ASSISTAN	IT_	DATE:	5-8-92			
	D.D. MATTURNS				TELEPHONE NO	(915)687-	7812		
TYPE OR PRINT NAME	P.R. MATTHEWS				TELEFRONE NO				
		7				MAY 1	1'92		
APPROVED BY	5-3	TITLE			DATE		··· · · · · · · · · · · · · · · · · ·		

CONDITIONS OF APPROVAL, IF ANY: