

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)
30-025-10092
5. Indicate Type of Lease
STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
N/A
7. Lease Name or Unit Agreement Name
ARROWHEAD GRAYBURG UNIT
8. Well No.
198
9. Pool name or Wildcat
ARROWHEAD/GB
10. Elevation(Show whether DF, RKB, RT, GR, etc.)
3455 DF

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG B DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well:	
OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/> OTHER INJECTOR
2. Name of Operator	
CHEVRON U.S.A. PRODUCTION CO.	
3. Address of Operator	
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS	
4. Well Location	
Unit Letter	E : 2310 Feet From Th NORTH
Section	7 Township 22S Range 37E NMPM LEA County
10. Elevation(Show whether DF, RKB, RT, GR, etc.)	
3455 DF	

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CMT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: DPN,RUN LINER PERF,STIM. <input checked="" type="checkbox"/>

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.

POOH W/ PROD. EQUIP. ISOLATE CSG. LEAK AT 815-851 & 408-439.
DRILL NEW FORMATION FROM 3736-3845 WITH 4.75" BIT. LOG HOLE: DSN-CAL-CCL.
CHANGE OUT WELLHEAD. UNDERREAM HOLE W/6" FROM 3675-3768.
RUN 4.5" LINER FROM SURFACE TO 3845'. PUMP 500 SX. OF CMT. RUN TEMP. SURVEY TOC AT 750'
DRILL OUT CEMENT TO 3843', TEST CASING TO 1000#-OK. PERF 700-702, SQX WITH 200 SX. OF CEMENT.
PERF 3812-3832 WITH 22 HOLES, 180 DEG. PHSD AND PERF 3638-3792, 122 HOLES.
ACIDIZE PERFS WITH 450 GALS OF 15% NEFE, SWAB TEST.
TIH WITH INJECTION EQUIP, SET PACKER AT 3600'.
LOAD BACKSIDE AND TEST TO 300 PSI-LOST 200# IN 2 MINS. WILL TEST AGAIN IN 6 MONTHS.
PROCEDURE OK WITH JERRY SEXTON W/ OCD.

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

SIGNATURE	<u>P.R. Matthews</u>	TITLE	<u>TECH. ASSISTANT</u>	DATE:	<u>4-28-92</u>
TYPE OR PRINT NAME	<u>P.R. MATTHEWS</u>			TELEPHONE NO	<u>(915)687-7812</u>

APPROVED BY	<u>JERRY SEXTON</u>	TITLE	<u>MANAGER</u>	DATE	<u>APR 30 '92</u>
CONDITIONS OF APPROVAL, IF ANY:					

CHEVRON U.S.A. INC.

DISPOSAL/INJECTION WELL
PRESSURE TEST REPORT
NEW MEXICOTUBING SIZE 2 3/8PKR. SETTING DEPTH 360PERFS TOP & BOTTOM 3638
3832

1. LEASE NAME: AGU 198 w/c
2. WELL NO: 198 w/c
3. LOCATION: UNIT _____ SEC 7 T 225 R 37E
4. COUNTY: LEA
5. REASON FOR TEST: ☒ INITIAL TEST PRIOR TO INJECTION
☐ AFTER WORKOVER
☐ FIVE YEAR TEST
☐ OTHER (SPECIFY) _____
6. DATE OF TEST: 4-8-92
7. TEST PRESSURE:

TIME	TUBING	CASING	SURFACE CASING
INITIAL	<u>open</u>	<u>300</u>	_____
15 MIN.	_____	_____	_____
30 MIN.	<u>open</u>	<u>0</u>	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. TEST WITNESSED BY OCD: ☐ YES ☒ NO
 IF YES, NAME OF OCD REP. _____
9. OPERATOR COMMENTS ON TEST: will Retest in 6 months
Per Jerry Sexton w/ OCD
10. WELL STATUS:
☐ ACTIVE ☐ TEMPORARILY ABANDONED ☐ OTHER (SPECIFY) W/O INT
11. CHEVRON REPRESENTATIVE: K B Pulliam SR. Delf Rep
 NAME TITLE
K B Pulliam
 SIGNATURE