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	P.O. Box	ION DIVISION	l						
DISTRICT				3000						
DISTRICT I		Santa re, New	Mexico 87504-2	2088						
P.O. Box 1980, Hobbs, NM 88 DISTRICT II	240									
P.O. Drawer Dd, Artesia, NM 88210					API NO. (assigned by OCD on New Wells)					
- ,						30-025-10167				
DISTRICT III 1000 Rio Brazos Rd., Azter, Nm 87410					5. Indicate T	ype of Lease STATE	FE FE	EX		
					6. State Oil	& Gas Lease No.				
	SUNDRY NOTICE		_	· · · · · · · · · · · · · · · · · · ·						
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"					7. Lease Nan EAVES	ne or Unit Agreemen	t Name	<u>aaaaa</u> aaaaaaa		
	(FORM C-101) FO	R SUCH PROPOSALS.	)		1					
Type of Well:  OIL					7					
WELL X	GAS WELL	OTHER								
2. Name of Operator					8. Well No.					
CHEVRON U.S.A. INC.							4			
3. Address of Operator		· · · · · · · · · · · · · · · · · · ·			9. Pool name		<u>'                                    </u>			
	LAND, TX 79702 AT	N: P.R. MATTHE	WS		SAN-ANE	THES ELM	ca XA	Sout		
4. Well Location	Ш	1074					<u> </u>			
Unit Letter	H :	1874 Feet From The	NORTH	Line and		554 Feet From The		Line		
Section			22S	Range	37E	NMPM	LEA	County		
		10. Elevation(Sh	ow whether DF, RKB, RT, C	iR, etc.)						
			3375 GL							
11	Check Appropriate	Box to Indecate Nature	of Notice, Report, or (							
NOTICE OF INTENTION TO: SUBSEQUENT RE					PORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	' <u>                                    </u>	EMEDIAL WORK		]	ALTER CASIN	G			
TEMPORARILY ABANDON	CHANGE PLANS		OMMENCE DRILLING OPNS	s. <b>Г</b>	7	PLUG AND AB	AN.			
PULL OR ALTER CASING		c	ASING TEST AND CMT JO	В	1			_		
OTHER: REPAIR	R CASING LEAK.	IXI I	THER:	<u> </u>	_5					

 Describe Proposed or Completed Operations(Clearly state all pertinent details, and give pertinent dates, including esticated date of starting any proposed work) SEE RULE 1103.

## IT IS PROPOSE TO:

- 1. CEMENT SQUEEZE THE CASING LEAK IN SUBJECT WELL.
- 2. CLEAN OUT WELL.
- 3. ACIDIZE PERFS LOCATED AT 3836-3952 WITH 5000 GALS OF 15% NEFE.
- 4. SWAB TEST.
- 5. RETURN TO PRODUCTION.

I hereby certify that the in	nformation above is true and domplete to the i	pest of my kno	wledge and belief.			
SIGNITURE	F. R. Mallin	TITLE	TECH. ASSISTANT	DATE:	01-06-92	
TYPE OR PRINT NAME	P.R. MATTHEWS			TELEPHONE NO.	(915)687-7812	
APPROVED BY	*** State of grant of	TITLE		DATE	JAN 09'92	