Submit 3 Copies to Appropriate District Offices

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION WELL API NO.

2.0.200	310 Old Santa Fe Trail, Room 206			30-025-10449		
DISTRICT II Santa Fe, New Mexico 87503 P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease			
· · · ·					EE X	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.			
SUNDRY NOTICES	S AND REPORTS ON WE	LLS				
(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"			7. Lease Name of Omt Agreement Name			
<del></del>	) FOR SUCH PROPOSALS.)				ł	
1. Type of Well: OIL WELLX GAS WELL OTHER			AMANDA			
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			PADDOCK			
4. Well Location	COUTU	1000		EACT	- 1	
Unit Letter J: 1980 Feet From The SOUTH Line and 1980 Feet From The EAST Line						
Section 25	Township 22S Ra	ange 37E N	MPM LEA		County	
	10. Elevation (Show when	ther DF, RKB, RT, GR, etc.)				
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
NOTICE OF INTENTION TO: SUB			SEQUENT A	EPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS.	PLUG AND ABANDON		
PULL OR ALTER CASING CASING TEST AND CE			MENT JOB			
OTHER:		OTHER: PB			X	
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.						
POH W/PROD EQPT. CO TO 5890'. 500#. PERFD 5010'-5082' W/2 JHPI GALS 15% ACID & 6000 GALS GEL. PLUGBACK WAS UNSUCCESSFUL EVALUATION.	F. ACZD W/39 BBLS 15% . SWABBED. RIH W/TBG	HCL. SWABBED. A B, PUMP & RODS; TB	CZD W/4800 G @ 5231'.	IG		
WORK PERFORMED 11/19/99 - 12/7	7/99					
I hereby certify that the information above is true and	l complete to the best of my knowledge	and belief.				
O. V. Pinla		TLE REGULATORY O.	Δ	05/10/200	0	
SIGNATURE TO COLUMN	TT	ILE TEGODATOR OF		DATE	<u> </u>	
TYPE OR PRINT NAME J. K. RIPLEY	<u>//</u>		TELEPHONE NO. (915)687-7148			
(This space for State Use)  OFICIAL CITY OF SUPERIORS OF AUGUS  APPROVED BY  TITLE						
	Daulis	O POUL PROPERTY			(i)	
APPROVED BY	Ti	TI.E		DATE AUG	197	