

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) <b>30-025-22109</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>N/A</b>
7. Lease Name or Unit Agreement Name <b>R. E. COLE (NCT-A)</b>
8. Well No. <b>8</b>
9. Pool name or Wildcat <b>BLINEBRY</b>

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator <b>CHEVRON U.S.A. INC.</b>
3. Address of Operator <b>P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE</b>	4. Well Location Unit Letter <b>K</b> : <b>2130</b> Feet From The <b>SOUTH</b> Line and <b>2130</b> Feet From The <b>WEST</b> Line Section <b>16</b> Township <b>22S</b> Range <b>37E</b> NMPM <b>LEA</b> County 10. Elevation(Show whether DF, RKB, RT, GR, etc.) <b>3393' GL</b>

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
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: <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABAN. <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.

4/19/94 - SPOT 25 SX @6350' - 6125' ON CIBP.  
4/20/94 - SET CIBP @5398', 25 SX ON TOP - 5263'.  
4/20/94 - SPOT 25 SX @3739' - 3600'.  
4/20/94 - SPOT 25 SX @1207'-1070'.  
4/20/94 - SPOT 10 SX @30' TO SURF.

CIRCULATE HOLE WITH 10# MUD  
INSTALL DRY HOLE MARKER

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

SIGNATURE Wendi Kingston TITLE **TECH. ASSISTANT** DATE: **04/28/94**  
TYPE OR PRINT NAME **WENDI KINGSTON** TELEPHONE NO. **(915)687-7436**

APPROVED BY Charles R. ... TITLE **OIL & GAS INSPECTOR** DATE **FEB 13 1995**  
CONDITIONS OF APPROVAL, IF ANY: