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
Revisied 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) 30-025-25519

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
DRINKARD "B"
NCT

1. Type of Well:
OIL WELL [X] GAS WELL [ ] OTHER

2. Name of Operator
CHEVRON U.S.A. INC.

8. Well No.
5

3. Address of Operator
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON

9. Pool name or Wildcat
BRUNSON DRINKARD-ABO,SOUTH

4. Well Location
Unit Letter O : 880 Feet From The SOUTH Line and 1980 Feet From The EAST Line
Section 30 Township 22S Range 38E NMPM LEA County

10. Elevation(Show whether DF, RKB, RT, GR, etc.)
3330' GR

11 Check Appropriate Box to Indecate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ] PLUG AND ABANDON [ ]
TEMPORARILY ABANDON [ ] CHANGE PLANS [ ]
PULL OR ALTER CASING [ ]
OTHER: [ ]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ] ALTER CASING [ ]
COMMENCE DRILLING OPNS. [ ] PLUG AND ABAN. [ ]
CASING TEST AND CMT JOB [ ]
OTHER: ACIDIZE [X]

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

WORK STARTED 09/01/93. MIRU, ND TREE, NU BOP, SWAB TBG CLEAN, RUN 211 JTS 3 1/2" 9.3# L-80 FRAC TBG. FRAC 400 BBLS LINEAR GEL, TREAT W/37,500 GALS 60% CO2 FOAM. SWAB. RIH W/2 7/8" 6.4# J-55 TBG TO 6739'. ND BOP, NU TREE. CLEANED LOCATION RDMO. TURN WELL OVER TO PRODUCTION 09/08/93.

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

SIGNITURE Wendi Kingston TITLE TECH. ASSISTANT DATE: 07/19/1995

TYPE OR PRINT NAME WENDI KINGSTON TELEPHONE NO. (915)687-7826

ORIGINAL SIGNED BY TIM GUMBEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE JUL 25 1995

CONDITIONS OF APPROVAL, IF ANY: