

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) 30-025-26212	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. 2607	
7. Lease Name or Unit Agreement Name EAVES	
8. Well No. 7	
9. Pool name or Wildcat WANTZ;ABO	
10. Elevation(Show whether DF, RKB, RT, GR, etc.)	

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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator CHEVRON U.S.A. INC.	
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON	
4. Well Location Unit Letter H : 2310' Feet From The NORTH Line and 500' Section 10 Township 22S Range 37E Feet From The EAST Line NMPM LEA County	
10. Elevation(Show whether DF, RKB, RT, GR, etc.)	

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: RECOMP FROM GRANITE WASH <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.

MIRU. SET CIBP @7010'. RU WEDGE WL RUN GR/CCL.
PERF F/6614'-6940'. ACDZ W/20,000 GALS 15% ACID.
RIH W/2 3/8" TBG TO 6549'.
WELL WORK COMPLETED 12/5/95.

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

SIGNATURE <i>Wendi Kingston</i>	TITLE TECH. ASSISTANT	DATE: 12/20/95
TYPE OR PRINT NAME WENDI KINGSTON		TELEPHONE NO. (915)687-7826

ORIGINAL SIGNED BY JERRY SEXTON
APPROVED BY DISTRICT I SUPERVISOR TITLE
CONDITIONS OF APPROVAL, IF ANY:

DATE **JAN 04 1996**

2 P Wanda Gu *dp*