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District Office

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-28910
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
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.)			
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Lease Name or Unit Agreement Name Lea ACL State	
2. Name of Operator Chevron U.S.A. Inc.		8. Well No. 1	
3. Address of Operator P.O. Box 670, Hobbs, NM 88240		9. Pool name or Wildcat Blinebry Oil & Gas &	
4. Well Location Unit Letter B : 600 Feet From The North Line and 2080 South Brunson Drinkard Abo Section 36 Township 22S Range 37E NMPM Lea County		10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3307	

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Acidize, add perfs <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.

SET PKR @ 6465' & ACDZ (6536-7274) W/3000 GAL 15% NEFE HCL, PERF UPPER BLINEBRY 5512, 5516, 5523, 5531 & 5537 W/2JHPF-180 DEG-47HSC, TOTAL 10 HOLES, SET RBP @ 5850 W/PKR @ 5576, ACDZ BLINEBRY W/ 2000 GAL 15% NEFE, SET PKR @ 5451 ACDZ UPPER BLINEBRY PERFS 5512-37, W/1500 GAL 15% NEFE, RDMOPU

WORK STARTED 11-02-89 WORK ENDED 11-07-89

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

SIGNATURE Paul Kautz TITLE Div. Dir. Mgr. DATE 11-10-89
TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 14 1989

RECEIVED

NOV 13 1989

OCD
HOBBS OFFICE

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-28910
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Lea ACL State
8. Well No. 1
9. Pool name or Wildcat Blinebry Oil & Gas + So. BRUNSON DRINKARD-abo
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3307

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 ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Chevron U.S.A. Inc.

3. Address of Operator
P.O. Box 670 Hobbs, NM 88240

4. Well Location
Unit Letter B : 600 Feet From The North Line and 2080 Feet From The East Line

Section 36 Township 22S Range 37E NMPM Lea County

11. Check Appropriate Box to Indicate 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: Acidize, add perfs ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

Acdz Abo perfs 6563-7274 w/3000 gallons 15% NEFE HCL, Perf 5512, 5516, 5523, 5531, 5537 @ 2JHPF. Acdz perfs 5592-5818 w/2000 gallons 15% NEFE HCL. Acdz perfs 5512-5537 w/1500 gallons NEFE HCL. Frac from 5512-5537 w/11500 40# XL gel & 26000# 20/40 Ottawa sd. RTP.

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

SIGNATURE M. E. Akins TITLE Staff Drilling Engineer DATE 10/20/89

TYPE OR PRINT NAME M. E. Akins TELEPHONE NO. 393-4121

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

OCT 24 1989

APPROVED BY _____ TITLE _____ DATE _____

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-

5a. Indicate Type of Lease

State ☒Fee ☐

5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.OIL
WELL ☒GAS
WELL ☐OTHER ☐

Name of Operator

Chevron U.S.A. Inc.

Address of Operator

P.O. Box 670 Hobbs, NM 88240

Location of Well

600

UNIT LETTER

B

560

FEET FROM THE

North

LINE AND

2080

FEET FROM

THE East

LINE, SECTION

36

TOWNSHIP

22S

RANGE

37E

NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

12. County

Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

FORM REMEDIAL WORK ☐PARTIALLY ABANDON ☐OR ALTER CASING ☐PLUG AND ABANDON ☐CHANGE PLANS ☐THEN ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒COMMENCE DRILLING OPS. ☐CASING TEST AND CEMENT JOB ☐OTHER ☐ALTERING CASING ☐PLUG AND ABANDONMENT ☐

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Work performed 10-7-88 thru 10-14-88

TD: 7617' PB: 7474'

POOH w/ production equip. Spot 2sx 20/40 sand on top of RBP, set at 5535'.
 Set CICR at 2724'. Continue to sqz holes in 5 1/2" csg f/2854' to 2886' w/50sx
 Class C. Tail in w/100sx C1 C. Displace cement w/ FW. Obtained sqz w/123 sx cmt
 in formation, 20sx cmt inside csg below CICR. Sting out of CICR and rev out 6sx cmt.
 Drlg CICR and cmt from 2723' to 2880', drlg firm cmt f/2808 to 2860', drlg hard
 cmt f/2860' to 2880', fell out of cmt, circ hole clean. Press tst csg to 500psi, RIH w/
 2 7/8" tbg to 4034', SN at 3852', swab. Set CICR at 2693', sqz holes in 5 1/2" csg
 f/2854' to 2886' w/100sx Class C and displace w/15bbl FW. Obtained sqz w/72sx cmt
 in formation, & 22sx cmt in csg below CICR. Sting out of CICR and rev out 6sx cmt.
 Tag cmt at 2689'. Drill cmt to 2871', free to 2877, circulate tbg clean. Test csg
 to 500psi, ok. Swab. TIH and tag sand at 5525', circ. clean. TIH w/ 2 7/8" tbg
 TAC at 5498', SN at 7268', EOT at 7305'. Run pump and rods, space out and hang on.
 Test tbg to 500psi, ok. test pmp to 500, ok. RDMOPU, turn over to production dept.

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

TITLE: Staff Drilling Engineer

DATE: 10-21-88

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE

DATE

OCT 25 1988

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

NO. OF COPIES RECEIVED		
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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Chevron U.S.A. Inc.

Address
P. O. Box 670, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)
☐ New Well
☒ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name: LEA "ACL" STATE
Well No.: 1
Pool Name, including Formation: S. Brunson Arkd/ab
Kind of Lease: R-8593
State, Federal or Fee: 2/1/88
Lease No.: State

Location
Unit Letter: B : 600 Feet From The North Line and 2080 Feet From The East
Line of Section: 36 Township: 22S Range: 37E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Koch Oil Co.
Address (Give address to which approved copy of this form is to be sent)
PO Box 1558, Brickenridge, TX 76204

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Warren Pot.
Address (Give address to which approved copy of this form is to be sent)
PO Box 1589 Tulsa, OK 74102

If well produces oil or liquids, give location of tanks.
Unit: B Sec: 36 Twp: 22S Rge: 37E
Is gas actually connected? yes When: 6-17-87

If this production is commingled with that from any other lease or pool, give commingling order number: SHC-677

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)

New Mexico Area Supt.

(Title)
12-17-87
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN - 4 1988, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT 1 SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-27-87	Date Compl. Ready to Prod. 6-4-87	Total Depth 7627		P.B.T.D.					
Elevations (DF, RKB, RT, CR, etc.) 3307	Name of Producing Formation S. BRUNSON ABO	Top Oil/Gas Pay		Tubing Depth					
Perforations 6563-6574						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4		8 5/8		1200		750 5x CLC			
7 7/8		5 1/2		7617		1200 5x CLC 1st STAGE			
						1700 5x CLC 2nd STAGE (DAN)			
						2550 5x CLC " " TAIL			

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 6-5-87		Date of Test 6-11-87		Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24	Tubing Pressure 30	Casing Pressure 30	Choke Size 2" WOO		
Actual Prod. During Test	Oil - Bbls. 9	Water - Bbls. 20	Gas - MCF 110		

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

OIL CONSERVATION DIVISION
P. O. BOX 2038
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

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5a. Indicate Type of Lease
State ☒ Free ☐
5. State Oil & Gas Lease No.

SUNDARY 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.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name Lea "ACL" State
Address of Operator P.O. Box 670, Hobbs, NM 88240	9. Well No. 1
Location of Well UNIT LETTER <u>B</u> . <u>600</u> FEET FROM THE <u>North</u> LINE AND <u>2080</u> FEET FROM THE <u>East</u> LINE, SECTION <u>36</u> TOWNSHIP <u>22S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or WHdcat Blinebry & S. Brunson Abo
11. Elevation (Show whether DF, RT, GR, etc.) 3307'	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

REPAIR REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
REPAIR OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
		OTHER <u>Downhole comingle Blinebry & S. Brunson Abo</u> <input checked="" type="checkbox"/>	

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.

Work performed 12-1-87 through 12-4-87

POOH w/ prod. equip. break circulation, drlg cmt and cmt ret, and sqz cmt from 5840 to 5870, circ clean, drlg cmt & CIBP to 6496, push CIBP down tag up at 7474, circ hole clean, RIH w/2 7/8" tubing to 7309, and prod. equip., pmp, rods, space out and hang well on to pmp. Turn over to production.

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

by M. E. Abbin TITLE Staff Drilling Engineer DATE Dec. 9, 1987

ORIGINAL SIGNED BY JERRY SEXTON

COPIES BY DISTRICT 1 SUPERVISOR

TITLE

ADDITIONS OF APPROVAL, IF ANY:

DEC 15 1987

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LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2038
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

5a. Indicate Type of Lease
State ☒ Free ☐
5. 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.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name Lea "ACL" State
Address of Operator P. O. Box 670, Hobbs, NM 88240	9. Well No. 1
Location of Well UNIT LETTER <u>B</u> <u>600</u> FEET FROM THE <u>North</u> LINE AND <u>2080</u> FEET FROM THE <u>East</u> LINE, SECTION <u>36</u> TOWNSHIP <u>22S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or WH/CL Blinebry & S. Brunson Abo
11. Elevation (Show whether DF, RT, GR, etc.) 3307'	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

REPAIR REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPWS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
ILL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Downhole commingle Blinebry & S. <u>DNC-677</u> Brunson Abo	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

It is proposed to drill cement retainer at 5850' and CIBP at 6495, clean out to float collar at 7525'. After going in hole with production tubing, rods and pump, well will be downhole commingled.

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

by M. E. O'Brien TITLE Staff Drilling Engineer DATE 11-30-87

ORIGINAL SIGNED BY JERRY SEXTON

COVER BY DISTRICT 1 SUPERVISOR

CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE DEC 1 1987