Submit 3 Copies

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico

Form C-103

to Appropriate District Office	Energy, Minerals and Natural F	Resources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATION DIVISION WELL API NO.		
DISTRICT II	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-025-29975
P.O. Drawer DD, Artesia, NM 88210		5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE X 6. State Oil & Gas Lease No.
SUNDRY NOT	ICES AND REPORTS ON WEL	LS	002564
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"			7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)			AMANDA
1. Type of Well: OIL GAS GAS			
WELL X WELL	OTHER		
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	<u>1, TX 79702</u>		Blinebry Oil & Gas (06660)
4. Well Location Unit Letter 0: 330	Feet From The South	Line and 16	
	rect rioin the south	Line and 16	Feet From The East Line
Section 25	Township 22S Re	inge 37E	NMPM Lea County
	10. Elevation (Show wheth	er DF, RKB, RT, GR, etc 3324	:.)
11. Check Ap	propriate Box to Indicate		Report or Other Data
NOTICE OF IN	NTENTION TO:		SEQUENT REPORT OF:
			TOTAL ON OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON L	REMEDIAL WORK	L ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB
OTHER:		OTHER: ADD PE	RFS TX
12. Describe Proposed or Completed One	rations (Clearly state all partinent det	nile and sine modern 4 lea	es, including estimated date of starting any proposed
work) SEE RULE 1103.	ranous (Citarry state an per timent ded	uis, and give pertinent dat	es, including estimated date of starting any proposed
GUN. ACDZ PERFS W/Z	200 GALS 15% NEFE HCL. FRAC 1/2-3/8" TBG TO 5351', RIH N	PERFS W/736 BLS L N/WATSON SCAB LINE	'. PERF F/5536'-5370', W/4" CSG INEAR GEL W/50% CO2 & 113,000 R PKR AND 4-1/2" LINER FROM
THIS WELL WILL REMA	IN OIL WELL DUE TO GOR.		
TEST 7-25-95: TBG 8 5 BO/2 BW/223 MCF	0 PSI		
I hereby certify that the information above is tr	ue and complete to the best of my knowledge	and belief.	
SIGNATURE Songe An	ar mi	E Technical Assist	cant DATE 11/06/95
TYPE OR PRINT NAME Sonja Gray			TELEPHONE NO. 915-687-7348
(11113 SPACE LOL SUICE USE)	AL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		713-007-7346
APPROVED BY	Trit	E	NGV 17 1995
			DATE