

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)

30-025-31329

6. Indicate Type of Lease

STATE



FEE



6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

ARROWHEAD GRAYBURG UNIT

8. Well No.

242

9. Pool name or Wildcat

ARROWHEAD GRAYBURG

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

GAS

WELL



WELL



OTHER

INJECTOR

2. Name of Operator

CHEVRON U.S.A. INC.

3. Address of Operator

P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS

4. Well Location

Unit Letter O : 560 Feet From The SOUTH Line and 1980 Feet From The EAST Line
Section 18 Township 22 S Range 37 E NMPM LEA County

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

3411.7 GR

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:



SUBSEQUENT REPORT OF:

REMEDIAL WORK



ALTER CASING



COMMENCE DRILLING OPNS.



PLUG AND ABAN.



CASING TEST AND CMT JOB



OTHER: DRILLING SUMMARY



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.

DRILL AND SURVEY 7 7/8" HOLE FROM 1155-3980.

LOG HOLE: DEN-CNL-GR-CAL-MLL-FMT.

RUN CASING: 5 1/2", 15.5 #, K-55, LT & C, SET AT 3980'.

MIXED 630 SXS. CMT, CIRC 70 SXS.

NU CASING SPOOL.

RELEASED RIG AT 3:30 PM ON 9-22-91.

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

SIGNATURE

P.R. Matthews

TITLE

TECH. ASSISTANT

DATE:

9-23-91

TYPE OR PRINT NAME

P.R. MATTHEWS

TELEPHONE NO.

(915)687-7812

APPROVED BY

[Signature]

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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Unit Letter

O

: 560

Feet From The

SOUTH

Line and

1980

Feet From The

EAST

Line

Section

18

Township

22S

Range

37E

NMPM

LEA

County

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

3411.7 GR

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CASING TEST AND CMT JOB



OTHER: DRILLING SUMMARY



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 CAPSTAR RIG # 2 ON 9-6-91

. SPUD 12 1/2" HOLE AT 22:00 HRS. ON 9-6-91.

DRILL AND SURVEY 0'-1155', TD 12 1/2" HOLE AT 18:00 HRS ON 9-8-91

O 9-8-91.

RUN 8 5/8" CASING, 28 JOINTS, 23#, M-50, ST& C TO 1155'.

PUMPED 700 SXS. CMT., CIRC. 128 SXS. TO SURFACE.

WELD ON WELL HEAD AND TEST TO 500 PSI.-OK.

WOC FOR 24 HRS., DRILL

DRILL OUT SHOE AND CONTINUE TO DRILL FORMATION WITH 7 7/8" BIT.

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

SIGNATURE

P.R. Matthews

TIT

TECH. ASSISTANT

DATE:

9/10/91

TYPE OR PRINT NAME

P.R. MATTHEWS

TELEPHONE NO.

(915)687-7812

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: