

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

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		API NO. (assigned by OCD on New Wells) 30-025-31561
1. Type of Well: OIL <input type="checkbox"/> GAS <input type="checkbox"/> WELL <input checked="" type="checkbox"/> WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator CHEVRON U.S.A. INC.		6. State Oil & Gas Lease No. N/A
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS		7. Lease Name or Unit Agreement Name ARROWHEAD GRAYBURG UNIT
4. Well Location Unit Letter L : 1950 Feet From The SOUTH Line and 350 Feet From The WEST Line Section 7 Township 22S Range 37E NMPM LEA County 10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3448 GE		8. Well No. 202
		9. Pool name or Wildcat ARROWHEAD/GB

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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"/>	ALTER CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CMT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: COMPLETION <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, DRILL OUT TO 3800. TEST CASING TO 1000#-OK.
LOG HOLE WITH GR-CCL-CBL-CET.
PERF AT 3784-3792,2 JHPF, 180 DEG. PHSD, 16 HOLES.
ACDZ PERFS WITH 50 GALS OF 15% NEFE. SWAB BACK ACID.
PERF AT 3670-3680, 20 HOLES, ACDZ WITH 250 GALS OF 15% NEFE. SWAB BACK.
PERF AT 3617-3774, 172 HOLES. SWAB TEST ZONES.
TIH WITH 2 7/8" TUBING, RODS AND PUMP. SN AT 3760' & EOT AT 3796'.
BEGIN PRODUCING ON 5-20-92.

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: **5-21-92**

TYPE OR PRINT NAME **P.R. MATTHEWS** TELEPHONE NO **(915)687-7812**

APPROVED BY JERRY SEXTON TITLE **GENERAL SUPERVISOR** DATE **MAY 26 '92**
CONDITIONS OF APPROVAL, IF ANY: