

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT-" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of well  
☒ Oil ☐ Gas ☐ Other ☒ ~~WATER~~

2. Name of Operator  
CHEVRON U.S.A. INC.

3. Address and Telephone No.  
P.O. BOX 1150 MIDLAND, TEXAS 79702 ATTN: P.R. MATTHEWS, ROOM 4115-A 915-687-7812

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
SEC. 6, T22S, R37E  
660' FSL & 660' FWL  
UNIT M

5. Lease Designation and Serial No.  
NM-1410

6. If Indian, Allottee or Tribe Name  
N/A

7. If Unit or CA, Agreement Designation  
N/A

8. Well Name and No.  
Arrowhead Grayburg ut.  
ASB # 181

9. API Well No.  
30-025-31580

10. Field and Pool, or Exploratory Area  
ARROWHEAD/ GB

11. County or Parish, State  
LEA COUNTY  
NEW MEXICO

**CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

| 12 | TYPE OF SUBMISSION                                    | TYPE OF ACTION                                       |  |  |
|----|---|--|--|--|
|    | <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Abandonment                 | <input type="checkbox"/> Change of Plans         |  |
|    | <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion                | <input type="checkbox"/> New Construction        |  |
|    | <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Plugging Back               | <input type="checkbox"/> Non-Routine Fracturing  |  |
|    |   | <input type="checkbox"/> Casing Repair               | <input type="checkbox"/> Water Shut-Off          |  |
|    |   | <input type="checkbox"/> Altering Casing             | <input type="checkbox"/> Conversion to Injection |  |
|    |   | <input checked="" type="checkbox"/> Other COMPLETION | <input type="checkbox"/> Dispose Water           |  |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimate date of starting any proposed operations, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

MIRU PU, DRILLED OUT CEMENT TO 3878', TESTED CASING TO 1000#-OK.  
PERFORATED 5.5" CASING WITH 4" GUNS, 180 DEG. PHSD AT 3701-3876.  
ACIDIZED EACH SET OF PERFORATIONS WITH 2 BBLs. OF 15% NEFE. SWAB BACK ACID.  
INSTALLED PRODUCTION TUBING AND RODS, WELL COMPLETED ON 7-14-92.  
WORKED STARTED ON 7-7-92 ENDED ON 7-15-92.

14. I hereby certify that the foregoing is true and correct

Signed P.R. Matthews Title

TECHNICAL ASSISTANT

Date 7-17-92

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or representations as to any matter within its jurisdiction.