

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Aztec, 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.	30-025-11873
1. Indicate Type of Lease	STATE ☐ FEZ ☒
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 ☐ GAS WELL ☒ OTHER	7. Lease Name or Unit Agreement Name G.W. Shahan
2. Name of Operator Chevron U.S.A. Inc.	8. Well No. 2
3. Address of Operator P.O. Box 670, Hobbs, NM 88240	9. Pool name or Wildcat Crosby Devonian Gas
4. Well Location Unit Letter B : 990 Feet From The North Line and 1650 Feet From The East Line Section 33 Township 25S Range 37E NMPM Lea County	10. Elevation (Show whether OF, RKB, RT, GR, etc.) 3003' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	Pull prod tbg, run bit & scraper, OTHER: RIH w/prod pkr, tst csg, RTP ☒

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 PU, RU & BLEW DN TBG & CSG PRESS PMP 60 BBLS KILL FLU DN CSG & TBG, TOH W/ PROD TBG, KILL WELL W/ 15 BBLS KILL FLU TIH W/ BIT TO 8120 SLMOH DEPTH CORRECTED TO 8248 PBTD, TIH W/2 3/8" PROD TBG TSTG A.S. TO 5000 PSI OK PMP 70 BBLS PKR FLU DN CSG SET PKR @ 8062 TST 5 1/2" x 2 3/8" ANNULUS TO 500 PSI FOR 15 MIN NO LEAK OFF, SWABBED SFL-3000 F/SURF MADE 6 RUNS IN 3 HRS REC 0-BO 42-BW, OPEN WELL ON 22/64 CK & TURN OVER TO PRODUCTION.

WORK STARTED 6-13-90 WORK ENDED 6-17-90

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

SIGNATURE M. E. Akins 6/18/90 TITLE Staff Drlg. Engr. DATE 6-18-90

TYPE OR PRINT NAME M. E. Akins

TELEPHONE NO. 393-4121

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

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL IF ANY:

JUN 21 1990

RECEIVED

JUN 20 1990

OCU
HOBBS OFFICE