

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

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|---|
| API NO. (assigned by OCD on New Wells) 30-025-29882 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. 26116 |
| 7. Lease Name or Unit Agreement Name EUNICE MONUMENT SOUTH UNIT |
| 8. Well No. 316W |
| 9. Pool name or Wildcat EUNICE MONUMENT |

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.)

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| 1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTOR |
| 2. Name of Operator CHEVRON U.S.A. INC. |
| 3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON |
| 4. Well Location Unit Letter J : 1847 Feet From The SOUTH Line and 1885 Feet From The EAST Line Section 10 Township 21S Range 36E NMPM LEA County |
| 10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3583' |

| | | | |
|--|---|---|---|
| 11 Check Appropriate Box to Indecate 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 checked="" 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: _____ <input 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 05/16/95. TAG FILL @3927'.CIRC CLEAN TO PBTD @4002'.
ACDZ PERFS 3752'-3970' W/5000 GALS 15% HCL.
TURN WELL OVER TO PRODUCTION 05/16/95.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE *Wendi Kingston* TITLE TECH. ASSISTANT DATE: 07/21/95
TYPE OR PRINT NAME WENDI KINGSTON TELEPHONE NO. (915)687-7826

APPROVED BY ORIGINATION DIVISION TITLE _____ DATE JUL 27 1995
CONDITIONS OF APPROVAL, IF ANY: _____

mP

RECEIVED

JUL 25 1988

JUD HOBBBS
OFFICE