

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

5a. Indicate Type of Lease
State Fee
5. 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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>Injector</u>	7. Unit Agreement Name <u>Eunice Monument South</u>
2. Name of Operator <u>Chevron U.S.A. Inc</u>	8. Farm or Lease Name <u>Unit</u>
3. Address of Operator <u>P.O. Box 670, Hobbs, NM 88240</u>	9. Well No. <u>217</u>
4. Location of Well UNIT LETTER <u>J</u> <u>2158</u> FEET FROM THE <u>East</u> LINE AND <u>3197</u> FEET FROM THE <u>North</u> LINE, SECTION <u>6</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or WHdcat <u>Eunice Monument Grayburg San Andres</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3562.9</u>	12. County <u>Lea</u>

16. 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 injection well pressure test

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB OTHER

17. 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.

The EMSU 217 initial test prior to injection for (tubing) was tested to 620psi and bled down to 600psi in 30 minutes. Performed 8-21-87. No witness.

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

SIGNED M. E. Abrin TITLE Staff Drilling Engineer DATE September 4, 1987

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE SEP 10 1987

CONDITIONS OF APPROVAL, IF ANY: