

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Box Drawer DD, Artesia, 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.	30-025-04265
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil / Gas Lease No.	
7. Lease Name or Unit Agreement Name	EUNICE MONUMENT SOUTH UNIT B
8. Well No.	872
9. Pool Name or Wildcat	GRAYBURG SAN ANDRES

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMI (FORM C-101) FOR SUCH PROPOSALS.

1. Type of Well: OIL WELL  GAS WELL  OTHER WIC INJ

2. Name of Operator: CHEVRON USA INC

3. Address of Operator: 15 SMITH ROAD, MIDLAND, TX 79705

4. Well Location  
Unit Letter C : 330 Feet From The NORTH Line and 2310 Feet From The WEST Line  
Section 14 Township 20-S Range 36-E NMPM LEA COUNTY

10. Elevation (Show whether DF, RKB, RT,GR, etc.) 3566' GL

11 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"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATION <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	INJECTOR RE-ACTIVATION <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.

- 8-14-02: MIRU. TAG SOLID @ 3926. PUH TO 3368'.
- 8-15-02: C/O FILL TO 4030. SET PKR & TEST TO 600#. LOST 40# IN 20 MINS. STAB @ 560# FOR 30 MIN. PUH TO 3731. SET PKR.
- 8-16-02: PU RBP & TIH TO 3465. PU PKR & TIH. ISOLATE CSG LEAK BTM OF LEAK @ 1661.
- 8-19-02: TIH W/PKR TO 1600. LD PKR. TIH W/RET TOOL & REL RBP. TIH W/RBP & PKR. TRY TO GET PKR & RBP TO TEST. RBP @ 3405. PKR @ 3402. TEST TO 1000#. REL PKR. DUMP 2 SX SAND.
- 8-20-02: PUMP 7 BBLS BALANCE PLUG CMT 54 SX SQUEEZE CREATE. SQZ 1.4 BBLS CMT INTO FORMATION HOLDING 1000# ON CSG.
- 8-21-02: MAINTAIN PSI ON CSG. WOC.
- 8-22-02: TIH & TAG CMT @ 1489. CO CMT FR 1489-1764. TIH TO 1507'. PU PKR & TIH TO 1507'.
- 8-23-02: SET PKR @ 1504. TEST CSG BELOW PKR TO 500# FOR 30 MIN-OK. UNSEAT PKR. TEST CSG FR SURF TO 3405. 30 MIN TEST-500#. CIRC SAND OFF RBP. LATCH ONTO RBP. TIH W/PPI TOOLS
- 8-26-02: SET PPI PKRS TOP @ 3960. BTM @ 3990. ACIDIZE GRAYBURG 3970-3980 W/500 GALS 15% HCL, 3926-3946 W/1000 GALS 15% HCL, 3896-3908 W/600 GALS 15% HCL, 3863-3887 W/1200 GALS 15% HCL. LEAVE PKR IN UNSET POSITION @ 3748.
- 8-27-02: SET INJ PKR @ 3748. PERFORM MIT. TEST TO 580#-OK. PUMP OUT PLUG. INSTL INJ TBG. (ORIGINAL CHART & COPY OF CHART ATTACHED)

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

SIGNATURE *Denise Leake* TITLE Regulatory Specialist DATE 10/18/2002

TYPE OR PRINT NAME Denise Leake Telephone No. 915-687-7375

(This space for State Use)

APPROVED \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

OCT 28 2002

