

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 to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.

NM 1151

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No. EUNICE

MONUMENT South Unit - B

9. API Well No.

989

10. Field and Pool, or Exploratory Area

EUNICE MONUMENT / G

11. County or Parish, State

LEA NM

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

CHEVRON USA INC.

3. Address and Telephone No.

P.O. Box 1150 Midland TX 79702 ATTN Rm 4111

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

990 FSL + 1650 FEL

SEC 14 T20S R36E

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other CS9 LEAK DEEPEN ACC'Z Convert to INJ.
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

MIRU tst CS9 to 500 psi; lost 300psi in 1 min. locate CS9 @ 253'-281' SET RBP @ 3680 Dump 25x SD on top mix + pump 100 sx' c' WOC 26 HRS T1H TAG cmt @ 120' Drlg cmt f/ 120'-259' tst CS9 to 500 psi 30 min lost 20 psi. T1H TAG cmt @ 336' Drlg cmt f/ 336'-573'. WASH SD TOH w/RBP. c/o fill f/ 3811-3872' Drlg NEW formation f/ 3872'-4160'. Run logs Density-Neutron-GR-CALIB. ACC'Z w/25 bbls SWAB BACK T1H w/ 2 3/8" tbg SET inj pkr @ 3664 tst CS9 to 580# for 30 min OK tst WELL HEAD to 1500 psi; OK Turn WELL OVER to production.

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

Signed E. G. Doherty

Title T.A. Drlg

Date 5/22/91

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____