

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 811 South First, Artesia, NM 87210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised March 25, 1999

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

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|-----------------------------------------------------------------------------------------------------|
| WELL API NO. 30-025-33998 |
| 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: MONUMENT 12 STATE |
| 8. Well No. 10 |
| 9. Pool name or Wildcat WILDCAT; DRINKARD |

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

2. Name of Operator
Chevron U.S.A. Inc.

3. Address of Operator
P.O. Box 1150 Midland, TX 79702

4. Well Location
 Unit Letter M : 677 feet from the SOUTH line and 791 feet from the WEST line
 Section 12 Township 19S Range 36E NMPM County LEA

10. Elevation (Show whether DR, RKB, RT, GR, etc.):
3735'

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 OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPLETION <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> | |
| OTHER: <input type="checkbox"/> | | OTHER: FB <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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

POH W/PROD EQPT. SET CCCR @ 7160'. PED 100 SX CMT. PERFD 6976'-7015' W/2 JHFF. DUMPED 35' CMT ON TOP CCCR. ACZD W/3000 GALS 20% & 50 RCNB'S. SWABBED. ATTEMPTED TO TST CSG & CCCR; LEAKING AROUND STINGER & MANDREL. TAGGED CCCR @ 6920'; PUSHED TO 7115'. SET CCCR @ 6916'; TSTD CSG & CCCR 500 PSI-OK. PED 100 SX CMT. SI WELL FOR 2 HRS, PED 100 SX CMT. SQZD PERFS TO 2100 PSI - HELD. PERFD 6840'-6858' W/2 JHFF. ACZD W/3000 GALS 20% & 60 RCNB'S. SWABBED. SET CCCR @ 6826', TSTD 500 PSI-OK. PPD 150 SX CMT; SQZD PERFS TO 2000 PSI. PERFD 6722'-6800' W/2 JHFF. ACZD W/4000 GALS 20% & 125 RCNB'S. SWABBED. DUMPED 850# SAND; TAGGED @ 6765'. FRACD 6500 GALS GEL. RIH W/PROD TBG. RETURNED WELL TO PRODUCTION.

WORK PERFORMED 11/18/99 - 12/23/99

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

SIGNATURE J.K. Ripley TITLE REGULATORY O.A. DATE 1/19/00
 Type or print name J. K. RIPLEY Telephone No. (915)687-7148

(This space for State use)
 APPROVED BY _____ TITLE _____ DATE APR 05 2000
 Conditions of approval, if any: _____

2A N Monument Abo