

Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 08971 30-025-85007

5. Indicate Type of Lease STATE [] FEE [X]

6. State Oil & Gas Lease No. 89101586

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.)

7. Lease Name or Unit Agreement Name

1. Type of Well: OIL WELL [] GAS WELL [] OTHER Injection

South Eunice Unit

2. Name of Operator Monoco Inc.

8. Well No. #30

3. Address of Operator P.O. Box 460 - Hobbs, NM 88240

9. Pool name or Wildcat Eunice 7 Rivers Green South

4. Well Location Unit Letter O : 660 Feet From The South Line and 1650 Feet From The East Line

Section 21 Township 22S Range 36E NMPM Lea County

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

11. 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: [] SUBSEQUENT REPORT OF: REMEDIAL WORK [] ALTERING CASING [] COMMENCE DRILLING OPNS. [] PLUG AND ABANDONMENT [] CASING TEST AND CEMENT JOB [] OTHER: Squeeze, Bridge & Install Liner [X]

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. 7-25-89 MIRR. 10 to 3835'. Perf. 4 JSPF 3665-68, 3672-74, 3677-80, 3682-84, 3686-88, 3692-94. (Total 56 shots). Set pkr @ 3628'. Acidized 7 Rivers Queen w/120 Bbls 15% HCL-FE mixed w/2 drums. Nalco 3952 conc. 24 hrs. GIH w/ 3 1/2" f.g. liner from 3526 to 3654. Pumped 107 sacks Class C cement @ 3 bpm. Squeezed to 1500#. Test log to 1100#, hold. Squeeze log. Leak from 1986-2077. DO cement & ret. DO liner. I.C. to T.D. Test log to 500# for 20 min. Hold 2XMC.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE W.W. Baker TITLE Administrative Supv DATE Aug 29, 1989 TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR APPROVED BY TITLE DATE

SEP 11 1989

CONDITIONS OF APPROVAL, IF ANY: