

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

Form C-103  
 Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
 State  Fee

5. State Oil & Gas Lease No.  
Federal

**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.)

Oil Well  Gas Well  OTHER- Injector

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

Address of Operator  
P.O. Box 670 Hobbs, NM 88240

Location of Well  
 UNIT LETTER L 1980 FEET FROM THE South LINE AND 660 FEET FROM

THE West LIMB, SECTION 8 TOWNSHIP 21S RANGE 36E NMPM.

7. Unit Agreement Name  
Eunice Monument South Unit

8. Farm or Lease Name

9. Well No.  
326

10. Field and Pool, or WHDCat  
Eunice Monument G/SA

15. Elevation (Show whether DF, RT, GR, etc.)  
3604' GL

12. County  
Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

- FORM REMEDIAL WORK
- PERMANENTLY ABANDON
- REPAIR OR ALTER CASING
- OTHER Deepen and convert to injection
- PLUG AND ABANDON
- CHANGE PLANS

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

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.

Clean out to TD @ 3914. Deepen well from 3914 ' to 4034 '. Log well.  
 Add additional Grayburg perforations as logs indicate. Acidize as necessary.  
 Equip for injection. Test casing, packer, and tubing to 500 psi for 30 minutes.  
 Return to production as an injector.

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

[Signature] TITLE Division Drilling Manager DATE 9-15-86

ORIGINAL SIGNED BY JERRY SEXTON  
 DISTRICT 1 SUPERVISOR  
 SIGNED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE SEP 17 1986

CONDITIONS OF APPROVAL, IF ANY: