	State of New	Mexico		
Submit 3 copies to Appropriate District Office	Energy, Minerals and Natural	Resources Department	Form (Revise	C-103 ed 1-1-8
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Box Drawer DD, Artesia, NM 8821 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NG (DO NOT USE THIS FORM FOR PR	OTICES AND REPORTS ON WE	88 co 87504-2088 LLS EN OR PLUG BACK TO	WELL API NO. 30-025-04504 5. Indicate Type of Lease	FEE
		R PERMI	EUNICE MONUMENT SOUTH UNIT	
Name of Operator CHEVRON	VIIIEN		8. Well No. 212	
Address of Operator 15 SMITH ROAD, MIDLAND, TX 79705			9. Pool Name or Wildcat EUNICE MONUMENT GRAYBURG	
4. Well Location Unit Letter I : Section 5	3300 3258 Feet From The NO		Feet From The <u>EAST</u> Line MPM <u>LEA</u> COUNTY	
	10. Elevation (Show whether DF, RK	B, RT,GR, etc.) 3569' GL		
11. Check	Appropriate Box to Indicate N	ature of Notice, Report	, or Other Data	
NOTICE OF INTENTION TO:			JBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	PLUG AND ABANDON CHANGE PLANS	REMEDIAL WORK COMMENCE DRILLING OP CASING TEST AND CEME	NT JOB	
OTHER:		OTHER:	RETURN TO ACTIVE PRODUCTION	✓

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.

4-08-03: PULL AND LAY DOWN INJ PACKER. TIH W/SUB PUMP & PUT ON PRODUCTION.

4-09-03: ON 24 HR OPT. PUMPING 53 BO, 28 MCF, & 783 BW.

FINAL REPORT

	08783	
I hereby certify that the information above is true and complete to the best of phy knowledge and belief. SIGNATURE TITLE Regulatory Specialist TYPE OR PRINT NAME Denise Leake	DATE <u>4/16/2003</u> Telephone No. 915-687-7375	
APPROVED Lay W. Winder CONDITIONS OF APPROVAL, IF ANY: TITLED FIELD REPRESENTATIVE IVSTAFF MANAGER DATE	APR 2 1 2003 DeSoto/Nichols 12-93 ver 1.0	

CURRENT WELLBORE DIAGRAM

