

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer Dd, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells)	30-025-04212
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	N/A
7. Lease Name or Unit Agreement Name	EUNICE MONUMENT SOUTH UNIT-B
8. Well No.	858
9. Pool name or Wildcat	EUNICE MONUMENT GR/SA
10. Elevation(Show whether DF, RKB, RT, GR, etc.)	3573' GL

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator CHEVRON U.S.A. INC.
3. Address of Operator P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE	4. Well Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line Section <u>11</u> Township <u>20 SOUTH</u> Range <u>36E</u> NMPM <u>LEA</u> County
10. Elevation(Show whether DF, RKB, RT, GR, etc.) 3573' GL	

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CMT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <u>CO, ACDZ & RTP</u> <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.

WORK STARTED 05/17/94. ND WH, NU BOP,MIRU SERFCO.
TREAT W/3500 GALS 2% KCL WTR, 1000 GALS TOL/IPA, 3500 GALS 15% HCL, FLUSH
W/23 BBLS 2% KCL WTR. SWAB.
RD PU, ND BOP, NU WH.
TURN WELL OVER TO PRODUCTION 05/18/94.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE	<u>Wendi Kingston</u>	TITLE	TECH. ASSISTANT
DATE:	05/31/94		
TYPE OR PRINT NAME	WENDI KINGSTON	TELEPHONE NO.	(915)687-7436
APPROVED BY	ORIGINAL SIGNED BY JERRY SEXTON	TITLE	DISTRICT I SUPERVISOR
CONDITIONS OF APPROVAL, IF ANY:	DATE	JUL 1	

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION	
Signature	<u>J. K. Ripley</u>	Date Approved	<u>FEB 10 1994</u>
Printed Name	J. K. Ripley	By	ORIGINAL SIGNED BY JERRY SEXTON
Date	1/26/94	Title	DISTRICT I SUPERVISOR
Telephone No.	(915)687-7148		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C - 104 must be filed for each pool in multiply completed wells.

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