

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

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

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

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

WELL API NO. <u>04221</u> ✓ <u>30-625-04221</u>
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.

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 ☐ injector OTHER	7. Lease Name or Unit Agreement Name <u>EUNICE MONUMENT</u> <u>South Unit - B</u>
2. Name of Operator <u>CHEVRON USA INC</u>	8. Well No. <u>851</u>
3. Address of Operator <u>P.O. Box 1150 Midland TX 79702 ATTN: ED DOHERTY Rm 4111</u>	9. Pool name or Wildcat <u>EUNICE MONUMENT</u>
4. Well Location Unit Letter <u>C</u> : <u>330</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>West</u> Line Section <u>11</u> Township <u>20S</u> Range <u>36E</u> NMPM <u>LEA</u> 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:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: <u>Perf & Convert to injection</u> ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: ☐

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.

SELECTIVELY PERF ZONE 4&5

WELL FORMER NAME WILLIAM P. BYRD #1

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

SIGNATURE

E.O. Doherty

TITLE

T.A. Delg

DATE

2/21/91

TYPE OR PRINT NAME

E.O. DOHERTY

TELEPHONE NO.

6877812

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: