

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.

30-025-04222

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 ☐

OTHER

2. Name of Operator

CHEVRON USA INC.

8. Well No.

852

3. Address of Operator

P.O. BOX 1150 MIDLAND, TX 79702 RM. 4115-A
ATTN: R. MATTHEWS

9. Pool name or Wildcat

EUNICE MONUMENT

4. Well Location

Unit Letter D : 330 Feet From The NORTH Line and 990 Feet From The WEST Line

Section

11

Township

20 S

Range

36 E

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: DEEPEN, PERF & ACDZ. ☒

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.

MIRU C/O WH NU BOP TST/CSG TO 500 PSI - OK
TIH W/4 1/4" BIT, DRLG. OUT CIBP at 3765' C/O F 3818-3860, DRLG NEW FORMATION 3860'
POOH, RU W/L RAN NUETRON CALIPER & GR. RD WL. 4000'
PERF 5" CSG. 3804' - 3838' W/3-3/8" GUNS, 180 DEG. PHSD 2 JHPF.
ACDZ PERFS 3804' - 3838' & OH 3860-4000' W/1500 GALS.
15% NEFE.
TIH W/PROD EQUIP.
RETURN TO PRODUCTION. 6-7-91

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

SIGNATURE

M. E. Akins

TITLE

DRLG. SUPT.

DATE

6-26-91

TYPE OR PRINT NAME

ME AKINS

915-687-7679

TELEPHONE NO.

(This space for State Use)

Witnessed by
Paul Kautz
Geologist

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: