

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**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO. <u>30-025-04223</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>WATER INJECTION</u>	7. Lease Name or Unit Agreement Name <u>EUNICE MONUMENT SOUTH UNIT - B</u>
2. Name of Operator <u>CHEVRON USA INC</u>	8. Well No. <u>860</u>
3. Address of Operator <u>P.O. BOX 670 HOBBS, NM 88240</u>	9. Pool name or Wildcat <u>EUNICE MONUMENT (GSA)</u>
4. Well Location Unit Letter <u>K</u> : <u>1650</u> Feet From The <u>SOUTH</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>12A</u> County _____	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3577 GL</u>	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: _____ <input 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.

Aug. 09, 1994  
Developed packer leak, pull and run packer  
Set @ 3698'  
Ran 30 minute PKR/csg Test to 330 psi

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

SIGNATURE Felix Trevino TITLE Production Specialist DATE 8/11/94  
TYPE OR PRINT NAME Felix Trevino TELEPHONE NO. 505-397-8745

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE ORIGINAL SIGNED BY KERRY SEXTON  
DISTRICT I SUPERVISOR DATE AUG 13 1994  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 13 1994

10000  
OFFICE