Submit 3 Copies to Appropriate

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revisied 1-1-89

District Office	0	IL CONSERVA	TION DIVISION						
		P.O. Bo	x 2088						
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		Santa Fe, Nev	w Mexico 87504-2	880					
DISTRICT II					_	by OCD on New We	lis)		
P.O. Drawer Dd, Artesia, NM 88210					30-025-042	·	<u> </u>		
DISTRICT III 1000 Rio Brazos Rd., Aztec, Nm 87410					5. Indicate Type of Lease STATE X FEE				
					8. State Oil & G	as 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						7. Lease Name or Unit Agreement Name			
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"						EUNICE MONUMENT SOUTH UNIT B			
	(FORM C-101)	FOR SUCH PROPOSAL	S.)]				
Type of Well: OIL	GAS								
WELL X	WELL	OTHER							
2. Name of Operator					8. Well No.				
CHEVRON U.S.A. INC.						893			
3. Address of Operator					8. Pool name or Wildcat				
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON					EUNICE MONUMENT				
4. Well Location Unit Letter	O :	660 Feet From The	SOUTH	Line and	1980	Feet From The	EAST Line	_	
Section 13		Township	20S	Range	36E			unty	
		10. Elevation	Show whether DF, RKB, RT, GF	3, etc.)					
			3551'						
NOTICE OF IN		ate Box to Indecate Nati	ure of Notice, Report, or Ot		ODT OF				
	_			JENI KEI	PORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK X					ł	ALTER CASING	\vdash		
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS.	<u> </u>	Į	PLUG AND ABAN.			
PULL OR ALTER CASING			CASING TEST AND CMT JOB	<u> </u>	J		_		
OTHER:			OTHER:						
12. Describe Proposed or Completed	Operations(Clearly sta	te all pertinent details, and gi	ve pertinent dates, including						
esticated date of starting any prop									
			//6000 GALS 15% A						
SWAB. TII	H W/2 3/8" TB	G TO 3798'. RDM	O. TURN WELL OVE	R TO PRO	ODUCTION O	6/02/95.			
I hereby certify that the information ab	ave to the and comple	its to the best of my knowled	ige and belief.						
SIGNITURE THE	DIMa	TITLE	TECH. ASSISTANT		DATE:	07/21/95			
- (, U 	2								
TYPE OR PRINT NAME	WENDI KING	ISTON			TELEPHONE NO.	(915)687-78	26		
		_				JUL 28	1995		
APPROVED BY		TITI F			DATE	UUL D()			

AECE VIEW

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