Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Energy, Minerals and Natural Resources Revised March 25, 1999 Office District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-04255 OIL CONSERVATION DIVISION District II 5. Indicate Type of Lease 811 South First, Artesia, NM 87210 2040 South Pacheco District III STATE 🗷 FEE Santa Fe, NM 87505 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 7. Lease Name or Unit Agreement Name: 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: FINICE MONUMENT SOUTH UNIT B Other Oil Well Gas Well 8. Well No. 2. Name of Operator 868 Chevron U.S.A. Inc. 9. Pool name or Wildcat 3. Address of Operator EUNICE MONUMENT; GRAYBURG-SAN ANDRES P.O. Box 1150 Midland, TX 79702 4. Well Location line 1980 NORTH line and\_ feet from the\_ 660 feet from the\_ Unit Letter \_\_\_ LEA County NMPM **Township** Range 36E Section 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: **ALTERING CASING** REMEDIAL WORK PLUG AND ABANDON PERFORM REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND **CHANGE PLANS**  $\mathbf{x}$ TEMPORARILY ABANDON **ABANDONMENT** CASING TEST AND **MULTIPLE** PULL OR ALTER CASING **CEMENT JOB** COMPLETION OTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. CHEVRON PROPOSES TO TA PER THE ATTACHED PROCEDURE. THE COMPLETED HEST IN MOTIVAL TO (महत्र १०) वेस विकास **अ** TOTAL COMMANDES FOR THE CAR 10 IL AFROYAN. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE REGULATORY O.A. SIGNATURE. Telephone No. (915) 687-7148 Type or print name J. (This space for State use)

TITLE

DATE

APPROVED BY\_

Conditions of approval, if any: