

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Injector

2. Name of Operator

Chevron U.S.A. Inc.

3. Address and Telephone No.

P.O. Box 1150, Midland, Texas 79702

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2310' FSL & 2310' FWL, Unit K, Sec. 14, T-20-S, R-36-E

5. Lease Designation and Serial No.

NM-1151

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Eunice Monument  
South Unit B

8. Well Name and No.

885

9. API Well No.

30-025-04272

10. Field and Pool, or Exploratory Area

Eunice Monument GB/SA

11. County or Parish, State

Lea County, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Inspection of Surface  
Piping and Cellar
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log (form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

6/10/91 Inspection of cellar and surface piping by O.C.D. Rep. Eddie Seay,  
Equipment O.K.

14. I hereby certify that the foregoing is true and correct

Signed D.M. Bohon D.M. Bohon Title Technical Assistant

Date 6/11/91

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

RECEIVED

JUL 09 1891

1100  
RECEIVED