

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N. M. OIL CONS. COMMISSION
P.O. BOX 1980
HOBBS, NEW MEXICO 88240

FORM APPROVED
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

| | |
|---|---|
| 1. Type of well <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other INJECTOR | 5. Lease Designation and Serial No. E-230 LC030143-B |
| 2. Name of Operator CHEVRON U.S.A. INC. | 6. If Indian, Allottee or Tribe Name |
| 3. Address and Telephone No. WENDI KINGSTON 915-687-7826 P. O. BOX 1150 MIDLAND, TX 79702 | 7. If Unit or CA, Agreement Designation |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 330' FEL UNIT I SEC 23, T20S,36E | 8. Well Name and No. Eunice Monument South Unit B#914 |
| | 9. API Well No. 30-025-04298 |
| | 10. Field and Pool, or Exploratory Area EUNICE MONUMENT |
| | 11. County or Parish, State LEA COUNTY, NEW MEXICO |

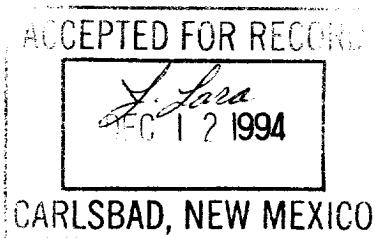
CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| 12 TYPE OF SUBMISSION | TYPE OF ACTION | |
|---|--|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input checked="" type="checkbox"/> Other CLEAN OUT/STIM | <input type="checkbox"/> 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 estimate 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.)*

WORK STARTED 10/13/94. MIRU NOWSCO, ACDZ W/3500 GALS 15% NEFE HCL.
TURN WELL OVER TO PRODUCTION 10/13/94.



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| | | |
|--|----------------------------------|----------------------|
| 14. I hereby certify that the foregoing is true and correct. | | |
| Signed <i>Wendi Kingston</i> | Title TECHNICAL ASSISTANT | Date 11/14/94 |
| (This space for Federal or State office use) | | |
| Approved by _____ | Title _____ | Date _____ |
| Conditions of approval, if any: | | |

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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O.C.D. HOBBIE
OFFICE