(June 1990)	DEPARTMENT OF		FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
	BUREAU OF LAND	MANAGEMENI	5. Lease Designation and Serial No.
Do not use this form for	proposals to drill or to	REPORTS ON WELLS deepen or reentry to a different res MIT—" for such proposals	5. If Indian, Allottee or Tribe Name
1. Type of Well	7. If Unit or CA, Agreement Designation		
Oil Gas Well Well Oth 2. Name of Operator	8. Weil Name and No. Eunice Monument South		
Chevron U.S.A. 3. Address and Telephone No.	<u>Unit B #915</u> 9. API Well No.		
P. O. Box 1150 4. Location of Well (Footage, Sec., T.	30-025-04300 10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T.	Eunice Monument DB/SA 11. County or Parish, State		
	<u>3. T-20S, R-36E</u>		Lea, NM
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO TYPE OF SUBMISSION TYPE OF ACTION			
_			Change of Plans
Subsequent Report		└ Plugging Back ☑ Casing Repair & Deepenin;	Non-Routine Fracturing           S         Water Shut-Off
Final Abandonment	Notice	Altering Casing Other	Conversion to Injection Dispose Water
13. Describe Proposed or Completed Opr	erations (Clearly state all pertinent d	details, and give pertinent dates, including estimated date or all markers and zones pertinent to this work.)*	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form i e of starting any proposed work. If well is directionally drilled,
gel & 100 sx C1 Squeeze 373-436 test cst 300 ps 898-3962'; sque hole clean. Tes Drill out cmt t (129 holes). Sp NEFE & RCNB. RI	"C" at 1405', 5' w/75 sx cmt, si-ok. Deepeen eeze w/75 sx C1 st liner 500 ps to 3297-3317', oot 2 bbls 15% H w/rods, pump	circ cmt to surface. I circ to surface. WOC. 3848'-4180'. Logging 10 "C", did not bump plug i-ok. Squeeze liner @ 2 test liner 500 psi-ok.	g. Tag cmt @ 4050', circ 3297' w/25 sx matrix. WOC. Perf 4112-3957' w/2 JHPF 3953-4134' w/3000 gals 15% lectricity. tied into
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4. I hereby certify that the foregoing is SignedK, KUP	nue and correct	Tile Sechnical Assist	ant Date 9/9/91
(This space for Federal or State offic	ce use)		· ·
Approved by Conditions of approval, if any:		Title	Date
			and the second management of the second s
			be United States any false, fictitious or fraudulent statements