

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-103  
Revised 1-1-89

**DISTRICT I**  
P.O. Box 1980, Hobbs, NM 88240  
**DISTRICT II**  
P.O. Drawer Dd, Artesia, NM 88210  
**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells) <b>30-025-04303</b>	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No. <b>N/A</b>	
7. Lease Name or Unit Agreement Name <b>EUNICE MONUMENT SOUTH UNIT-B</b>	
8. Well No. <b>919</b>	
9. Pool name or Wildcat <b>EUNICE MONUMENT</b>	

**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: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator <b>CHEVRON U.S.A. INC.</b>	
3. Address of Operator <b>P.O. BOX 1150 MIDLAND, TX 79702 ATTN: NITA RICE</b>	
4. Well Location Unit Letter <b>N</b> : <b>660</b> Feet From The <b>SOUTH</b> Line and <b>1980</b> Feet From The <b>WEST</b> Line Section <b>23</b> Township <b>20 SOUTH</b> Range <b>36E</b> NMPM <b>LEA</b> County	
10. Elevation(Show whether DF, RKB, RT, GR, etc.) <b>3571' GL</b>	

11 Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CMT JOB <input type="checkbox"/>
OTHER: <b>ACID FRAC</b> <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABAN. <input type="checkbox"/>

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.

WE PROPOSE TO: MIRU PU, POH W/TBG. CO TO 4130'. SPOT ACID F/3950'-4130'.  
SET PKR @3910'. ACDZ W/10,000 GALS 15% HECL. SWAB. RIH W/TBG.  
TURN WELL OVER TO PRODUCTION

I hereby certify that the information above is true and complete to the best of my knowledge and belief.  
SIGNATURE *Wendi Kingston* TITLE **TECH. ASSISTANT** DATE: **07/21/94**  
TYPE OR PRINT NAME **WENDI KINGSTON** TELEPHONE NO. **(915)687-7436**

APPROVED BY **JERRY SEXTON** TITLE **DISTRICT I SUPERVISOR** DATE **JUL 25 1994**  
CONDITIONS OF APPROVAL, IF ANY: