Submit 3 Copies to Appropriate

Form C-103 Revisied 1-1-89

District Office

State of New Mexico
Energy, Minerals and Natural Resources Departmen
OIL CONSERVATION DIVISION

		P.	O. Box 2088													
DISTRICT I		Santa Fe,	New Mexico 87504	4-2088												
P.O. Box 1980, Hobbe, NM (18240															
DISTRICT II						API NO. (assigned by OCD on New Wells)										
P.O. Drawer Dd, Artesia, NM 88210					30-025-0		•									
DISTRICT III 1000 Rio Brazos Rd., Aztec,	Nm 87410				5. Indicate T	ype of Lease										
1000 1110 014200 114., 72100,	1111 07410				1	STATE [X FEE									
					6. State Oil	& Gas Lease No.										
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"					7. Lesse Name or Unit Agreement Name EUNICE MONUMENT SOUTH UNIT											
										(FORM C-101) F	OR SUCH PROPO	SALS.)		LOWICE IV	ICIAOMEM 1 20	OUTH UNIT
									Type of Well: OIL	0.40			·	1		
WELL	GAS WELL	OTHER IN	ICCTOR													
2. Name of Operator		OTHER IN.	JECTOR		ł											
1	NILLS A INC				B. Well No.		· 									
3. Address of Operator	CHEVRON U.S.A. INC.					140 <u>wic</u>										
•) AND TY 79702 AT	TAL MENDIN	INCCTON		9. Pool name											
4. Well Location	P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON					EUNICE MONUMENT										
Unit Letter	C :	660 Feet From	The NORTH	Line and	100	20 -	14/50-									
Section	36	Township		Range	36E	Feet From The	WEST Line									
		10. Elev	ation(Show whether DF, RKB, RT	, GR, etc.)	002	NMPM L	EA County									
			3551'													
11	Check Appropriate	Box to Indecate	Nature of Notice, Report, or	r Other Data												
NOTICE (OF INTENTION TO:			QUENT RE	PORT OF											
PERFORM REMEDIAL WORK	PLUG AND ABANDO	N	REMEDIAL WORK	IX	1	ALTER CASING	_									
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OP	Ne -	1		-									
PULL OR ALTER CASING			CASING TEST AND CMT J		4	PLUG AND ABAN.	· 📙									
OTHER:			OTHER:	°° ∟	J											
			OTHER:													
12. Describe Proposed or Con	pleted Operations(Clearly state (Il pertinent details a	nd give pertinent dates, including													
esticated date of starting ar	y proposed work) SEE RULE 110	3.	in give permissit detes, including													
MIRU	6/23/95.															
ACDZ	W/6000 GALS 15% /	ACID. FLUSH														
TURN	WELL OVER TO PROD	OUCTION 06/2	23/95													
			-0,00.													
hereby certify that the informat	ion approve the true and complete to	the hast of	adada A E R A													
IGNITURE ()	Maria	~		·												
- Live	and although	TITLE	TECH. ASSISTAN	<u> </u>	DATE:	07/24/95										
YPE OR PRINT NAME	WENDI KINGST	ON				10.4 =										
					TELEPHONE NO.	(915)687-78	26									
PPROVED BY RIGINAL SE	CMITTON 20 JOHN	7.031				1111 9 0 40	חב									
		TITLE		(DATE	JUL 28 19	JJ									
ONDITIONS OF APPROVAL IF	ANY: PAR ARTICLES															

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