Submit 3 Copies to Appropriate District Office

State of New Mexico energy, Minerals and Natural Resources Department

Form	C	-1	03	
Revis	d	1	.1.	89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION

Revised 1-1-0.

P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088	WELL API NO.		
DISTRICT II Santa Fe New Mexico 8	1 20_026_21112		
P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease		
DISTRICT III	STATE X FEE		
1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELL	s VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN O	OR PLUG BACK TO A 7 Lease Name or Unit Agreement Name		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERI (FORM C-101) FOR SUCH PROPOSALS.)	MIT TO THE PROPERTY OF THE PRO		
Type of Weil:			
OIL QAS WELL OTHER			
2. Name of Operator	Eunice Monument South Unit B		
Chevron U.S.A. Inc.	8. Well No. 881		
3. Address of Operator	9. Pool name or Wildcat		
P. O. Box 1150, Midland, Texas 79702			
4. Well Location	Eunice Monument GR/SA		
Unit Letter K: 2080 Feet From The South	Line and 1880 Feet From The West Line		
100 100 110	rea rion file west the		
Section 13 Township 20S Rang	ge 36E NMPM Lea County		
10. Elevation (Show whether D			
11. Check Appropriate Box to Indicate N	ature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:		
	OCCUPATION OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING		
EMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB		
	OTHER: Report of Cellar Inspection		
OTHER: OTHER: Report of Cellar Inspection			
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.			
2/17/92 - Inspection done on cellar and surface	e piping by O.C.D. Rep. R. A. Sadler		
Everything O.K.	- 1-1-3 -7 o.c.b. hop. h. A. bautet.		
- · · · · ·			

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SKINATURE J. K. RUPLLY TITLE Technical Assistant DATE 2/18/92

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

OIL & GAS HISPECTOR

FEB x 1°32

CONDITIONS OF APPROVAL, IF ANY:

RECEWEYED
FEB 8 9 99992
OCO HOUSER OFFICE