Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 District II 30-025-35067 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III 1000 Rio Brazos Rd., Aztec, NM 87410 STATE IX Santa Fe, NM 87505 FEE \square District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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: MONUMENT 23 STATE Oil Well 🕱 Gas Well Other 2. Name of Operator 8. Well No. Chevron U.S.A. Inc. 3. Address of Operator 9. Pool name or Wildcat P.O. Box 1150 Midland, TX 79702 MONUMENT; ABO, NORTH 4. Well Location 2310 feet from the NORTH line and 990 feet from the line Section 23 Township 198 Range **NMPM** County LEA 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND ABANDONMENT** PULL OR ALTER CASING **MULTIPLE** CASING TEST AND COMPLETION CEMENT JOB OTHER: OTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. SPUDDED 14-3/4" HOLE 8/9/00. DRILLED TO 421'; SET 11-3/4" CSG @ 420'. CMTD W/350 SX CL "C", CIRC TO SURF. DRILLED TO 2750'; SET 8-5/8" CSG. CMID W/900 SX CL "C", CIRC TO SURF. DRILLED TO 7495'; SET 5-1/2" CSG @ 7175'. CMTD W/355 SX CL "H". WOC 23 DAYS. TOC @ 5550'. I hereby certify that the information above is true and complete to the best of my knowledge and belief. _____DATE____**9/27/00** Type or print name J. K. RIPLEY Telephone No. (9<u>15)687-7148</u> (This space for State use)

TPREMIST LOUPERNOON

APPROVED BY

Conditions of approval, if any: