

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Enc., Minerals and Natural Resources Department

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

**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. ✓
3002506300
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
Eunice Monument South Unit

8. Well No.  
EMCU # 160

9. Pool name or Wildcat  
Eunice Monument Grayburg - SA

**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 ☐ GAS WELL ☐ OTHER Water injection

2. Name of Operator  
Chevron USA, Inc.

3. Address of Operator  
P.O. Box 670 Hobbs, New Mexico 88240

4. Well Location  
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line

Section 31 Township 20S Range 37 NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Casing Integrity Test ☒

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.

Bled down casing pressure - all gas. Load casing with 1 barrel water. Pressure up to 340 PSI. Held for 20 minutes. Tubing pressure remained at 0 PSI.

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

SIGNATURE J. M. Tupman TITLE Field Petroleum Engineer DATE 12-19-90

TYPE OR PRINT NAME J. M. Tupman

TELEPHONE NO. 505-393-4121

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: