

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Bureau of Geology, 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.

5. Indicate Type of Lease

STATE ☒

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"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

EUNICE MONUMENT SOUTH UNIT

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER W1W

2. Name of Operator

CHEVRON USA INC

8. Well No.

136

3. Address of Operator

P.O. Box 670 HOBBS N.M. 88240

9. Pool name or Wildcat

EUNICE-MONUMENT-6-5A

4. Well Location

Unit Letter FC 1980 Feet From The NORTH Line and 1980 Feet From The WEST Line

Section

24.31

Township

21S

Range

36E

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: 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.

DUG UP CELLAR AND REPIPED THE CASING VALVE TO SURFACE,

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

SIGNATURE

C.L. Morrill

TITLE

Area Operations Supv.

DATE

4.15.91

TYPE OR PRINT NAME

C.L. Morrill

TELEPHONE NO. 393-4121

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: