| THE PART WHAT THE | CAN | LIAIC |
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| DISTRIBUTION      | 1   |       |
| SANTA FE          |     |       |
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| LAND OFFICE       |     |       |
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## OIL CONSERVATION DIVISION

| Form  | C-1 | 0 | 3   |   |
|-------|-----|---|-----|---|
| Revis | e d | ١ | 0 - | ١ |

| DISTRIBUTION SANTA FE  | P. O. BO   | <b>:</b>  | Form C-103<br>Revised 10-1- |                      |  |  |
|--|--|---|-----------------------------|----------------------|--|--|
| rice   | SANTA FE, NEW MEXICO 87501   |   | Sa. Indicate Ty             | ype at Lease         |  |  |
| U.S.O.S.   |  | State X   | F•• 🗌                       |                      |  |  |
| OPERATOR   |  |   | 5. State Oil 6              | Gas Lease No.        |  |  |
| CUNDD  | A NOTICES AND DEPORTS ON   | wethe   | mm                          | mmm                  |  |  |
| SUNUK<br>(DO HOT USE THIS FOR FOR PROJ<br>USE "APPLICATI     | Y NOTICES AND REPORTS ON TO DEEPEN OF PLUE BON FOR PERMIT - " (FORM C-101) FOR SUC | WELLS ACK TO A DIPPERENT RESERVOIR. IN PROPOSALS.)  |                             |                      |  |  |
| OIL X WELL OTHER-  |  | 7. Unii Agreem<br>Eunice Mo<br>South Uni            | onument<br>it               |                      |  |  |
| 2. Name of Operator Chevron U.S.A.                           | Inc.   | •   | B. Farm or Lea              | ize Name             |  |  |
| 3. Address of Operator                                       |  |   | 9. Well No.                 | <del></del>          |  |  |
| P.O. Box 670 Hobbs, NM 88240                                 |  |   | 161                         | 161                  |  |  |
| L 19   | 80 South   | LINE AND PEET                                       | Eunice Mo                   |                      |  |  |
| West   | 31 20S   | 37F   | имем.                       |                      |  |  |
|  | 15. Elevation (Show whether  | DF, RT, GR, etc.)                                   | 12. County                  | <del>74</del> 4444   |  |  |
|  | 3540' DF   | <del> </del>  | Lea                         |                      |  |  |
| Check A<br>NOTICE OF IN                                      | ppropriate Box To Indicate N   |   |                             | _                    |  |  |
|  |  | · SOBSEQU   | JENT REPORT OF              | F:                   |  |  |
| TEMPORARILY ABANDON  | PLUG AND ABANDON   | REMEDIAL WORK                                       | ALTI                        | ERING CASING         |  |  |
| PULL OR ALTER CASING   | CHANGE PLANS   | COMMENCE DRILLING OPHS.  CASING TEST AND CEMENT JOB | PLUS                        | AND ABANDONMENT      |  |  |
| Deepen & Acidize   |  | OTHER   | J                           | E                    |  |  |
|  | X  |   |                             |                      |  |  |
| 17. Describe Proposed or Completed Open work) SEE RULE 1603. | ations (Clearly state all pertinent deta   | ils, and give pertinent dates, incl                 | uding estimated date o      | starting any propose |  |  |
| Deepen well to 3945' squeeze well. Equip                     | . Log well. Acidize op<br>to pump. Return well t                                   | en hole as necessary<br>o production.               | . Chemical                  | •                    |  |  |
|  |  |   |                             |                      |  |  |
|  |  |   | ٠                           |                      |  |  |
|  |  |   |                             |                      |  |  |
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|  | •  | •   |                             |                      |  |  |
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|  |  |   |                             | •                    |  |  |
|  |  |   |                             |                      |  |  |
| •  |  |   |                             |                      |  |  |
| 18. I hereby certify that the information ab                 | ove is true and complete to the beat of  | my knowledge and belief.                            |                             |                      |  |  |
| IGHED 2 / Ball   | · / ·  |   |                             |                      |  |  |
|  |  | sion Drilling Man                                   | ager DATE 4-7-              | 1986                 |  |  |
| ORIGINAL S COURTS SUPER                                      |  |   |                             |                      |  |  |
| ONDITIONS OF APPROVAL, IF ANY                                | 11744  |   | DATE                        | <del></del>          |  |  |