

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103 -
Revised 10-1-

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

<p align="center">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p align="center"><small>(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.)</small></p>		
1. <input checked="" type="checkbox"/> OIL WELL 2. <input type="checkbox"/> GAS WELL 3. <input type="checkbox"/> OTHER	7. Unit Agreement Name Eunice Monument South Unit	
4. Name of Operator Chevron U.S.A. Inc.	8. Farm or Lease Name	
5. Address of Operator P.O. Box 670 Hobbs, NM 88240	9. Well No. 175	
6. Location of Well 11th LETTER <u>N</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM <u>West</u> LINE, SECTION <u>32</u> TOWNSHIP <u>20S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Wildcat Eunice Monument G/SA	
11. Elevation (Show whether DF, RT, GR, etc.) 3545	12. County Lea	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
<input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> MAINTENANCE <input type="checkbox"/> OR ALTER CASING	<input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS	<input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/> OTHER <u>cleanout, log, perf</u>	<input type="checkbox"/> ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations) SEE RULE 1103.

It is proposed to clean out the subject well to original TD, log with GR-CNL-CCL, evaluate for perforations, treat as necessary and return to production.

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

Jerry Sexton TITLE Staff Drilling Engineer DATE August 11, 1987

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

DATE AUG 14 1987

RECEIVED
AUG 13 1987
OCCB
HOBBS OFFICE