

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State ☒ Fee ☐

5. 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.)

| | |
|---|---|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 7. Unit Agreement Name Eunice Monument South Unit |
| 2. Name of Operator Chevron U.S.A. Inc. | 8. Farm or Lease Name |
| 3. Address of Operator P.O. Box 670 Hobbs, NM 88240 | 9. Well No. 149 |
| 4. Location of Well UNIT LETTER H 2030 FEET FROM THE North LINE AND 760 FEET FROM East 31 TOWNSHIP 20S RANGE 37E NMPM. | 10. Field and Pool, or Wildcat Eunice Monument |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3531.5 GL | 12. County Lea |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☒
OTHER ☐

17. 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.

TD 7 7/8" hole @ 4100'. Finished logging 3:00 pm 11-10-1985. RU and ran 101 joints 5 1/2" 15.5# K-55 LT&C set @ 4100'. Cemented with 400 sacks class "C" 1% D-60 1/2#/sack D-29 1#/sack Tuffplug .2% D-46. Plug down 6:00 am 11-11-1985. TOC from temperature survey @ 1625'.

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

SIGNED [Signature]

TITLE Division Drilling Manager DATE 11-12-1985

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR

TITLE

DATE NOV 15 1985

CONDITIONS OF APPROVAL, IF ANY: