

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

API NO. (assigned by OCD on New Wells)	
30-025-29396	
5. Indicate Type of Lease	
STATE	<input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
N/A	
7. Lease Name or Unit Agreement Name	
EUNICE MONUMENT SOUTH UNIT	
8. Well No.	
117	
9. Pool name or Wildcat	
EUNICE MONUMENT G & J	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
3533 GE	

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 <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	
CHEVRON U.S.A. INC.	
3. Address of Operator	
P.O. BOX 1150 MIDLAND, TX 79702 ATTN: P.R. MATTHEWS	
4. Well Location	
Unit Letter	L
Section	30
Feet From The	1980
Township	SOUTH
Range	20S
Line and	660
Range	37E
NMPM	LEA
County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
3533 GE	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		
OTHER:	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTER CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABAN.	<input type="checkbox"/>
CASING TEST AND CMT JOB	<input type="checkbox"/>		
OTHER: ACIDIZE	<input checked="" type="checkbox"/>		

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.

MIRU, POOH WITH TBG. AND RODS
ACIDIZE PERFS FROM 3745-3929 WITH 4000 GALS. OF 15% NEFE. SWAB TEST PERFS.
TIH WITH PRODUCTION EQUIP. AND RETURN TO PRODUCTION ON 6-26-92.

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

SIGNATURE P.R. Matthews TITLE TECH. ASSISTANT DATE: 7/1/92

TYPE OR PRINT NAME P.R. MATTHEWS TELEPHONE NO. (915)687-7812

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUL 06 '92

CONDITIONS OF APPROVAL, IF ANY: