

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL  
(Other instruction:  
verse side)

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Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.  
LC-031740-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER Injector

2. NAME OF OPERATOR

Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR

P. O. Box 670, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

Unit F 1941 FNL & 1980 FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3543' GL

7. UNIT AGREEMENT NAME

Eunice Monument South Unit

8. FARM OR LEASE NAME

9. WELL NO.

201

10. FIELD AND POOL, OR WILDCAT

Eunice Monument

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec 4 T21S R36E

12. COUNTY OR PARISH

Lea

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

Convert to Injector

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any  
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-  
nent to this work.)

Clean out well to TD @ 3860'. Run logs from 3000' to TD. Evaluate logs to determine  
if any additional Grayburg perforations are needed. Perforate, if necessary, from  
logs. Acidize as necessary. Equip well for injection. Test casing, packer, and tubing  
to 500 psi for 30 minutes. Return well to production as an injector.

18. I hereby certify that the foregoing is true and correct.

SIGNED

*P. H. Bullock*

TITLE Division Drilling Manager

DATE 6-25-1986

(This space for Federal or State office use)

Orig. Spd. [unclear]

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

7-2-86

Subject to  
Like Approval

\*See Instructions on Reverse Side

Title 18 U.S.C. 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the  
United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.