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LAND OFFICE	
OPERATOR	

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

Form C-103
Revised 10-1-7

3a. Indicate Type of Lease	☒ Federal
5. State Oil & Gas Lease No.	Federal LC-031740-B

SUNDY 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.)

OIL WELL ☐	GAS WELL ☐	OTHER ☒ Injector	7. Unit Agreement Name Eunice Monument South Unit
Name of Operator Chevron U.S.A. Inc.			8. Farm or Lease Name
Address of Operator P.O. Box 670 Hobbs, NM 88240			9. Well No. 201
Location of Well UNIT LETTER F 5940 1941 South North 1980			10. Field and Pool, or Wildcat Eunice Monument
West 4 21S 36E			
THE LINE, SECTION TOWNSHIP RANGE NMPM.			
15. Elevation (Show whether DF, RT, CR, etc.) 3543' GL			12. County Lea

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

NOTICE OF INTENTION TO:

FORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐
PROBABLY ABANDON ☐	CHANGE PLANS ☐
DRILL OR ALTER CASING ☐	OTHER ☒ Convert to Injector

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOBS ☐	
OTHER ☐	

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.

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.

FOR RECORD ONLY

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

P. H. Bullock Jr.

TITLE Division Drilling Manager DATE 6-25-1986

VERIFIED BY _____ TITLE _____ DATE _____
NOTATIONS OF APPROVAL, IF ANY: _____