

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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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.	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		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. 180
4. Location of Well UNIT LETTER <u>A</u> <u>627</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>4</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> N.M.P.M.		10. Field and Pool, or Wildcat Eunice Monument
15. Elevation (Show whether DF, RT, GR, etc.)		12. County Lea

16. 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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

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.

Acidized with 3500 gallons 15% NEFE HCL. Chemical squeezed with 110 gallons inhibitor and 5 gallons surfactant in 66 bbls cut brine water. Equipped well to pump.

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

SIGNED P. H. Bailey Jr. TITLE Division Drilling Manager DATE 11-22-1985

Eddie W. Seay

APPROVED BY Oil & Gas Inspector

TITLE _____

DATE NOV 26 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

NOV 25 1985

NOV 25 1985