

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions on re-
verse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

LC031740B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Eunice Monument South Unit

8. FARM OR LEASE NAME

9. WELL NO.

230

10. FIELD AND POOL, OR WILDCAT
Eunice Monument GB/SA

11. SEC. T. R. N. OR BLK. AND
SURVEY OR AREA

Sec. 4, T21S, R36E

12. COUNTY OR PARISH 13. STATE
Lea NM

1. OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR

P.O. Box 670, Hobbs, New Mexico 88240

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

Unit 0, 3300' FSL & 1980" FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, OR, ETC.)

3564'

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) plug zone 6, perf, acidz

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 pertinent to this work.)

8/30/89 Pluback OH W/6sx 12/20sd.

8/31/89 Perf zones 1-3 @ 3622-26, 3668-76, 3680-98, total of 60 holes 2 JHPF 180 deg phasing 4" HSC. Dumped total of 600# hydromite.

9/1/89 to 9/4/89 Tag hydro @ 3791' spot acid across perfs set pkr. at 3570' acidz perfs 3668/3698 W/1500 gal.. Swab well dry returned to production.

RECEIVED
SEP 6 11 05 AM '89
OIL
AREA

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

SIGNED M. E. Abner

TITLE Staff Dir'l. Engr.

DATE 9/5/89

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

RECEIVED

SEP 25 1989

OCD
HOBBS OFFICE