

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 Cd, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, Nm 87410

API NO. (assigned by OCD on New Wells)

30-025-04496

5. Indicate Type of Lease

STATE



FEE



6. State Oil & Gas Lease No.

2616

7. Lease Name or Unit Agreement Name

EUNICE MONUMENT SOUTH UNIT

8. Well No.

257

9. Pool name or Wildcat

EUNICE MONUMENT SOUTH UNIT

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

GAS

WELL



WELL



OTHER

INJECTOR

2. Name of Operator

CHEVRON U.S.A. INC.

3. Address of Operator

P.O. BOX 1150 MIDLAND, TX 79702 ATTN: WENDI KINGSTON

4. Well Location

Unit Letter

P

660 Feet From The

SOUTH

Line and

660 Feet From The

EAST

Line

Section

5

Township

21S

Range

36E

NMPM

LEA

County

10. Elevation(Show whether DF, RKB, RT, GR, etc.)

3585'

11

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK



PLUG AND ABANDON



TEMPORARILY ABANDON



CHANGE PLANS



PULL OR ALTER CASING



OTHER:

INJECTOR STIM



SUBSEQUENT REPORT OF:

REMEDIAL WORK



ALTER CASING



COMMENCE DRILLING OPNS.



PLUG AND ABAN.



CASING TEST AND CMT JOB



OTHER:



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, TAG TD @3924'.

ACDZ W/4000 GALS 15% NEFEA.

RDMO. TURN WELL OVER TO PRODUCTION 11/30/95.

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

SIGNATURE

Wendi Kingston

TITLE

TECH. ASSISTANT

DATE:

12/20/95

TYPE OR PRINT NAME

WENDI KINGSTON

TELEPHONE NO.

(915)687-7826

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY

DISTRICT I SUPERVISOR

TITLE

DATE

DEC 27 1995

CONDITIONS OF APPROVAL, IF ANY:

