

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION**

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-025-04498

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

EUNICE MONUMENT SOUTH UNIT

8. Well No.

245

9. Pool name or Wildcat  
EUNICE MONUMENT; GRAYBURG-SAN ANDRES

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 WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER INJECTION	
2. Name of Operator Chevron U.S.A. Inc.	
3. Address of Operator P.O. Box 1150, Midland, TX 79702	
4. Well Location Unit Letter T : 1980 Feet From The SOUTH Line and 660 Feet From The WEST Line Section 5 Township 21S Range 36E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☒ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT 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.

FOUND HOLE IN FIRST JT OF TBG. REPLACED 1 JT TBG; SET PKR @ 3734'. CIRC PKR FLUID. TSTD 550 PSI 30 MIN. RETURNED WELL TO INJECTION.

WORK PERFORMED 10/9/97

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

SIGNATURE

*J. K. Ripley*

TITLE TECHNICAL ASSISTANT

DATE 11/3/97

TYPE OR PRINT NAME J. K. RIPLEY

TELEPHONE NO. (915)687-7148

(This space for State Use)

APPROVED BY CHRIS WILLIAMS  
SUPERVISOR

MAY 26 1998

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: