NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease
State [X] Fee [ ]

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.)

OIL WELL [ ] GAS WELL [X] OTHER-

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, New Mexico 88240

9. Well No.
254

Location of Well
UNIT LETTER U , 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 5 TOWNSHIP 21S RANGE 36E NMPM.

10. Field and Pool, or Wildcat
Eunice Monument G-SA

15. Elevation (Show whether DF, RT, GR, etc.)
3588' GL

12. County
Lea

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER Deepen Well [X]	

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.

TIH with 4 3/4" drill and deepen to 4052. Acidized open hole with 5000 gals 15% NEFE HCL. Perforated from 3724 - 3766. Acidized perfs, 3724 - 3766, with 500 gals 15% NEFE HCL. Loaded tubing/casing annulus with 5 gals of corrosion inhibitor. Equipped well to pump and returned to production.

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

SIGNED M W Casey TITLE Proration Engineer DATE 8/11/86

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE AUG 14 1986

CONDITIONS OF APPROVAL, IF ANY: