Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office v. Minerals and Natural Resources En Revised March 25, 1999 District I LLL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-025-04508 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE 😠 FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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: EUNICE MONOMENT SOUTH UNIT Oil Well Gas Well Other INJECTOR 8. Well No. 2. Name of Operator 215 Chevron U.S.A. Inc. 9. Pool name or Wildcat 3. Address of Operator EUNICE MONUMENT; GRAYBURG-SAN ANDRES P.O. Box 1150 Midland, TX 79702 4. Well Location 3258 NORTH feet from the line and feet from the Unit Letter line **Township** Range **NMPM** County 3**6**E LEA Section 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 11. 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 CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND TEMPORARILY ABANDON **ABANDONMENT** CASING TEST AND  $\mathbf{x}$ **MULTIPLE PULL OR ALTER CASING** COMPLETION CEMENT JOB OTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. POH W/PKR & TBG. ISOLATED CSG LEAK 1385'-1416'; UNABLE TO ESTAB IR. PERFD SQZ HOLES @ 1408'. PPD 14 BBLS INCREASED 400#-1000#. DUMPED 2 SX SD DN CSG. SET CICR @ 1350'. SPOTTED CMT TO CICR. SOZD W/75 SK CMT. DO CICR & CMT TO 1410', WASHED TO 1530'. REPLACED CLOSING SHAFT SEALS ON BOP. SET CICR @ 1350'; SQZD W/110 SX CMT. DO CICR & CMT TO 1430', WASHED TO 1496'. RIH W/INJ TBG & PKR; PKR @ 3650'. RAN MIT. RETURNED WELL TO INJECTION. WORK PERFORMED 11/12/01 - 12/4/01 どれぬひご I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE REGULATORY O.A. DATE. **SIGNATURE** Telephone No. Type or print name (915)687-7148 (This space for State use) 1 3 1 DATE APPROVED BY TITLE Conditions of approval, if any:

