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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 ☒	Fee ☐
5. State Oil & Gas Lease No.	

SUNDURY 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 ☐ OTHER- <u>Injector</u>		7. Unit Agreement Name <u>Eunice Monument South Unit</u>
Name of Operator <u>Chevron U.S.A. Inc.</u>		8. Farm or Lease Name
Address of Operator <u>P.O. Box 670, Hobbs, New Mexico 88240</u>		9. Well No. <u>243</u>
Location of Well UNIT LETTER <u>R</u> . <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>5</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> NMPM.		10. Field and Pool, or Whidam <u>Eunice Monument G-SA</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3587' RH</u>		12. County <u>Lea</u>

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
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REFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐ WELL OR ALTER CASING ☐ OTHER ☐	PLUG AND ABANDON ☐ CHANGE PLANS ☐ OTHER ☐	REMEDIAL WORK ☐ COMMENCE DRILLING OPERATIONS ☐ CASING TEST AND CEMENT JOB ☐ OTHER <u>Deepen + converted To Injector</u> ☒	ALTERING CASING ☐ PLUG AND ABANDONMENT ☐ OTHER <u>R-7766</u> ☒
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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.

Deepen well to 4040' use 6 1/8" bit to 3880' and 4 3/4" bit to TD. Squeezed cement leak from 122' - 427' with 300 sacks Class C cement. Perforated from 3730' - 3741'. Acidized perfs from 3730' - 3741' with 1100 gals 15% NEFE HCL and opened hole from 3772 - 4040' with 7000 gals 15% NEFE HCL. TIH with OTIS Interlock packer on 2 3/8 IPC tubing and set at 3678. Loaded tubing/casing with packer fluid. Notified OCD of test - no witness. Equipped well to inject. Well is shut-in pending completion of injection system.

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

SIGNED BY <u>MW Casey</u> ORIGINAL SIGNED BY JERRY SEXTON DISTRICT SUPERVISOR	TITLE <u>Division Peroration Engineer</u> DATE <u>8/29/86</u>
APPROVED BY _____ TITLES OF APPROVAL, IF ANY:	DATE <u>SEP 4 1986</u>

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