

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.	30-025-04528
5. Indicate Type of Lease	Federal STATE <input type="checkbox"/> FEED <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name:	Enrico Monument South Unit
8. Well No.	252
9. Pool name or Wildcat	En - Mon; Shy - 5A.

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 <u>W/W</u>	
2. Name of Operator	Chevron USA Inc.
3. Address of Operator	
4. Well Location Unit Letter <u>W</u> : <u>660</u> feet from the <u>5</u> line and <u>1980</u> feet from the <u>E</u> line Section <u>6</u> Township <u>21S</u> Range <u>36E</u> NMPM County <u>LEA</u>	
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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: SI Status ☒

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.

Well was placed in SI Status effect 8-11-2000
pending approval of authority to inject by Santa
Fe. Federal Form 3160-5 also on file.

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

SIGNATURE Guy R. Wink TITLE Art. Secial 1st DATE 10/4/2000
Type or print name Guy R. Wink Telephone No. 390-7142

(This space for State use)
APPROVED BY Guy R. Wink TITLE FIELD REP. II DATE 10-5-2000
Conditions of approval, if any

