Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources District I Revised March 25, 1999 1625 N. French Dr., Hobbs, NM 87240 WELL API NO. District II OIL CONSERVATION DIVISION 30-025-04532 811 South First, Artesia, NM 87210 5. Indicate Type of Lease District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 STATE x FEE \square District IV 2040 South Pacheco, Santa Fe, NM 87505 6. State Oil & Gas Lease No. 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: Oil Well EUNICE MONUMENT SOUTH UNIT Gas Well Other INJECTOR 2. Name of Operator 8. Well No. Chevron U.S.A. Inc. 195 3. Address of Operator 9. Pool name or Wildcat P.O. Box 1150, Midland, TX 79702 EUNICE MONUMENT; GRAYBURG-SAN ANDRES 4. Well Location Unit Letter 1965 feet from the NORTH line and feet from the EAST line Section 6 Township 215 363 **NMPM** County LEA 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 \mathbf{x} ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. **PLUG AND ABANDONMENT PULL OR ALTER CASING** MULTIPLE CASING TEST AND 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/TBG & PKR. WASHED TO 3937'. DRLD TO 4040'. CIRC CLEAN. ACZD OH 3770'-4040' W/4000 GALS 15%. RIH W/TBG & PKR; PKR @ 3617'. RAN MIT. RETURNED WELL TO INJECTION. WORK PERFORMED 8/23/00 - 8/29/00 I hereby certify that the information above is true and complete to the best of my knowledge and belief. _DATE_ Type or print name J. K. RTPLEY Telephone No. (915) 687-7148 (This space for State use) APPROVED BY

TITLE

Conditions of approval, if any: