Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I 1625 N. French Dr., Hobbs, NM 87240 WELL API NO. District II OIL CONSERVATION DIVISION 30-025-04552 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 STATE X FEE 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: Oil Well EUNICE MONUMENT SOUTH UNIT Gas Well Other 2. Name of Operator 8. Well No. Chevron U.S.A. Inc. 288 3. Address of Operator 9. Pool name or Wildcat P.O. Box 1150 Midland, TX 79702 BUNICE MONUMENT; GRAYBURG-SAN ANDRES 4. Well Location Unit Letter 330 feet from the line and 2310 feet from the line Section Township 218 Range 36E **NMPM** County LEA 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3607' 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** TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT** PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: OTHER: CONTINUE TA STATUS  $\mathbf{x}$ 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. CHEVRON U.S.A., INC. REQUESTS CONTINUED TA STATUS PENDING EVALUATION. RAN MIT (CHART ATTACHED). This Approval of Temporary Abandonment Expires I hereby certify that the information above is true and complete to the best of my knowledge and belief. **SIGNATURE** TITLE REGULATORY O.A. \_DATE \_\_\_\_**10/26/00** Type or print name J. K. RIPLEY Telephone N (This space for State use)

TITLE

DATE

APPROVED BY

Conditions of approval, if any:

