

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
P.O. BOX 1900  
MEXICO 88240

SUBMIT IN TRI  
(Other instructions on re-  
DATE\*

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

LC 031740 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Eunice Monument South Unit

8. FARM OR LEASE NAME

9. WELL NO.

295

10. FIELD AND POOL, OR WILDCAT

Eunice Monument G/SA

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 8, T21S, R36E

12. COUNTY OR PARISH

Lea

13. STATE

NM

1. OIL WELL ☐ GAS WELL ☐ OTHER Injector

2. NAME OF OPERATOR  
Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR  
P.O. Box 670 Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

Unit F, 1980' FNL & 1980' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3581' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Deepen and Convert to Injector

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(Note: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Deepened from 3870' to 4056'. Ran GR/CCL/CNL/Caliper logs. Acidized with 4000 gallons 15% NEFE HCL. Equipped for injection with 2 3/8" IPC tubing and packer set @ 3702'. Tested casing and packer to 600 psi for 30 minutes (OK). Work performed 12/3/86 - 12/8/86.

ACCEPTED FOR RECORD

JAN 08 1987

CAPISBAD, NEW MEXICO

18. I hereby certify that the foregoing is true and correct

SIGNED

M. E. Abin

TITLE

Staff Drilling Engineer

DATE

12-17-1986

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side